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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Corpo				
SUBJECT: Ray's	7 Jay's Hand	uman tod Liability Company	and scaping Servi	ces LL
The enclosed Articles of An	nendment and fee(s) are subt	nitted for filing.		
Please return all correspond	ence concerning this matter	to the following:	•	
	Raymor	Name of Person	ognec	
		Firm/Company		
	145 West	Terry Circ	le	
	Mary E. Baysandio	Sther L City/State and Zip Code CUSFIXI+OS objused for future atmus		
For further information cond	cerning this matter, please ca	' \	, - ,	
Raymond	Wagner .	at (850)Area Code	543 - 7761 Daytime Telephone Number	-
Enclosed is a check for the f	following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en	Certificate of St	atus &
Registration	G ADDRESS: on Section of Corporations 6327	Registra	T/COURIER ADDRESS: tion Section of Corporations Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Ray's 4 Jay's Hand	YMAN & Company (A Florida Limited Lis	as it now appears of bility Company)	G Crvi Co	3 LLC	
The Articles of Organization for this Limited L		ere filed on O	Hober 20,	2017and assign	ed
Florida document number_\700021	8014.				
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	of the limited liabili	ty company here	:		
The new name must be distinguishable and contain the	words "Limited Liability	Company," the design	gnation "LLC" or the	abbreviation "L.L.C	"
Enter new principal offices address, if application	cable:			<u>ಹ</u>	SE ALI
(Principal office address MUST BE A STREE	ET ADDRESS)			، ب_ حد	CRE
	· ·			=	¥S. AS.
					-155.4°C
Enter new mailing address, if applicable:				Z	
3	POV				TO T
(Mailing address MAY BE A POST OFFICE	<u> </u>				<u> </u>
B. If amending the registered agent and registered agent and/or the new registered o		ce address on o	ur records, ente	r the name of	the new
Name of New Registered Agent:					
New Registered Office Address:	<u>145 We</u>	S+ Terry Enter Florida	Circle street address		
	Mary 8	Esther	, Florida _	32569 Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:				

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

	Authorized Person(s) authorized to mai rom our records:	nage, <u>enter the</u>	title, name, and address of each	person being added
MGR= Ma AMBR= Au	nager thorized Member			
<u> Title</u>	<u>Name</u>	Address		Type of Action
MGRM	Raymond E. Wagner	145We	st Terry Circle	Add
	•	Mary	Esther, FL 3256	9_□ Remove
<u>NG RM</u>	Clyde J. Griffin, JR.	190	Brewer Circle	
	Clyde J. Griffin, JR.	Mari	Sther FL 305	769 K Remove
			- 	Change
				Add
				□ Remove
			<u> </u>	Change
				□ Add
				Remove
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f amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
	
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	JAN 16
	A= :
	2: 3: Single Part
Tective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicable occument's effective date on the Department of State's records.	date of filing or more than 90 days after filing.) Pursuant to 605.0207
record specifies a delayed effective date, but not a The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of:
ated December 20, 2017 Ay Nagner Signature of a member or authorize	ed representative of a member
Raymond E. Wagner Typed or printed in	2 name of signee
Page 3	of 2

Page 3 of 3

Filing Fee: \$25.00