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Y. SCOTT OCT 1 5 2023

COVER LETTER

TO: Registration Se Division of Cor					
Salmons Re	aliy, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter	_			
	Eric C. Millhom				
		Name of Person			
	Millhorn Elder Law Planni	ing Group, PLLC			
		Firm/Company	20	EVIS S	
	11031 US Highway 301, S	uite 103	2023 OCT -3	SECRE	
		Address		95. 95.	
	Oxford, FL 34484		P _M	0.438. 15.45	
		City/State and Zip Code		EAST EAST EAST EAST EAST EAST EAST EAST	
	dana@millhornlaw.com			윉	
		to be used for future annual report noti	fication)		
For further information of	concerning this matter, please c	all:			
Eric C. Millhorn		352 330-3366 at ()			
Name o	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclose		
Mailing Addre		Street Address:	ction		
Registration Division of O		Registration Section Division of Corporations			
P.O. Box 632	27	The Centre of 7			
Tallahassee.	FL 32314	2415 N. Monro	e Street, Suite 810		

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Salmons Realty, LLC (Name of the Limited Liability	Company as it now appears on our records.)	
(A Florida l	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on January 1, 2018	and assigned
Florida document number L17000261870		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Bradley Ward Salmons, LLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	SE NVIII 1023
		OC REAL
		人。
Enter new mailing address, if applicable:		S F
.		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the n	ame of the new register
Name of New Registered Agent:		
Name Dangiotannal Coffices Addresses		
New Registered Office Address:	Enter Florida street address	
	121	
	, Florida	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager
AMDD -	A seek a missian

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			□Change
			□Add
			200 Remove
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ffective date, if other than an effective date is listed, the date	the date of filit	ng:	or to data of Gli	nu or more than	(optiona	ıl)	o 605 020
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record specifies a delayed effi Lis filed.	ective date, but no	ot an effective	time, at 12:0	l a.m. on the c	arlier of: (b)	The 90th day	after the
ated SEPTEMBER	.28th	2023	·	00			
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