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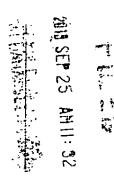
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COVER LETTER

	istration Sect sion of Corpe		x n		
SUBJECT:	McGill & Mc	Swain, LLC			
SOBJECT.	Name of Limited Liability Company				10 20 No. 10 No.
The enclosed	Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return	all correspond	lence concerning this matter	to the following:		· .
		Natalie McSwain			
Name of Person					
McGill & McSwain, LLC					
170 South Oak Avenue					
Address					
		Bartow FL 33830			
		mcswainnatalie@yahoo.con	City/State and Zip Code	·	
		E-mail address: (t	to be used for future annual report notif	ication)	
For further inf	formation con	cerning this matter, please ca	all:		
Natalie McSw	/ain		863 618-7118		
	Name of P	erson	Area Code Daytime	Telephone Number	
Enclosed is a	check for the	following amount:			
■ \$25.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L.	Swain, L	ر کے	:		, " [*] , ''
(Name of the Limited L. (A F	iability Company as it lorida Limited Liability	now appears on our Company)	records.)		T
The Articles of Organization for this Limited Liabil Florida document number <u>L 18000123</u>	ity Company were 1 425	iled on <u>May</u>	16,2018	_ and assign	ned
This amendment is submitted to amend the following	ng:				<u> 1</u> 6,
A. If amending name, enter the new name of the	limited liability co	ompany here:			
The new name must be distinguishable and contain the words Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A)	···	pany." the designation	t "LLC" or the abbre	viation "L.L.C	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON	 Σ				
B. If amending the registered agent and/or i	• • • • • • • • • • • • • • • • • • • •	ddress on our ro	ecords, enter th	e name of	the new
registered agent and/or the new registered office	address here:				
Name of New Registered Agent: New Registered Office Address:	Natalie 242 Me	English Librarial and an agreement	Idamen		
~	Auburnda	y.	_, Florida <u>3</u> 3	3823 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

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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Linda A McGill	170 South Oak Avenue	7
		Bartow F1. 33830	Add
			■ Remove
			Change
MGR	Franklin S McGill	170 South Oak Avenue	
		Bartow FL 33830	Add
			■ Remove
			☐ Change
			□ Add
			Remove
			Change
			□ Add
			☐ Remove
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		October 1				
ffective date, if other than an effective date is listed, the date lote: If the date inserted in the ocument's effective date on the	iis block does no	ot meet the appli	icable statutory t	or more than 90 days illing requirements	optional) after filing.) Pursuant , this date will not b	to 605.0207 (e listed as t
e record specifies a dela The 90th day after the	ayed effective record is file	e date, but n d.	ot an effectiv	e time, at 12:	01 a.m. on the ϵ	earlier of:
ated September 24		2019				
VOL1	.00		, ·			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00