h18000268434

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COVER LETTER

	Registration Se Division of Cor						
eun irz		Outdoor Advertising					
SUBJEC	::	Name of Limited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all correspo	ondence concerning this matter	to the following:				
		Joseph Stephenson					
		,	Name of Person				
		Stephenson Outdoor Adve	rtising LLC.				
			Firm/Company	····			
		4036 Belmoor Dr.					
		Address					
		Palm Harbor, Florida 34685					
			City/State and Zip Code				
		jsoutdooradvertising@gmai					
		E-mail address: (to be used for future annual report not	ification)			
For furth	er information c	concerning this matter, please c	all:				
Joseph S	tephenson		727 560-8500 at ()				
	Name o	of Person		ne Telephone Number			
Enclosed	Lis a check for the	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 enclosed)			
	Mailing Addres		Street Address:				
Registration Section			Registration Se Division of Co				
Division of Corporations P.O. Box 6327		•	The Centre of 1	•			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATION 2022 JUN 2 | PM 12 08

Stephenson Outdoor Advertising LLC.

A San Francis (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compan	y were filed on 11-16-2018	and assigned
Florida document number L18000268434		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "l	.l.C" or the abbreviation "L.lC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	dress
	City	Florida
	City	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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Good Deeds LLC.	PO. Box 1686 Pinellas Park , Fl 33780	= Add
			□Remove
			□Change
			Remove
			□Change
			□Add
			□ Remove
			□Change
			⊡Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Ti/Thun.u.

	
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Note: If the	ate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 and date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a effective date on the Department of State's records.
e record spe rd is filed.	eifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Jul 12, 2022
-	Signature of a member or authorized representative of a member
	Signature of a memori of authorized representative of a themori
	Joseph Ston hon son
~	Typed or printed name of signee