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Office Use Only



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COVER LETTER

	tration Sect on of Corp				
		PALACE, LLC			
SUBJECT:		Name of Limi	ted Liability Company		
The enclosed A	Articles of A	mendment and fee(s) are subr	nitted for filing.		
Please return a	II correspond	dence concerning this matter t	to the following:		
		AYO JOHNSON			
			Name of Person		
			Firm/Company	<u> </u>	
		2111 E BIRD STREET			
		ТАМРА	Address		
			City/State and Zip Code		
		AYOJOHNSON89@GMAI			
		E-mail address: (t	o be used for future annual	report notification)	
For further info	ormation cor	ncerning this matter, please ca	ill:		
AYO JOHNSON		407 77 at ()	7 5471		
	Name of l	rerson	Area Code	Daytime Telepl	none Number
Enclosed is a c	heck for the	following amount:			
■ \$25.00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is enc		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ng Address: stration Se		<u>Street A</u> Registr	ddress: ation Section	
Divi:	sion of Co	rporations	Division of Corporations		
P.O.	Box 6327		The Ce	ntre of Tallaha	issee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our record Liability Company)	ds.)
were filed on MARCH 05 , 201	and assigned
oility company here:	
ility Company," the designation "LLC	C" or the abbreviation "L.L.C."
2111 E BIRD STREET.	
TAMPA, FL. 33604	2022 SEC
2111 E BIRD STREET,	V 28 P
TAMPA, FL. 33604	OF SEE . F
	
address on our records, <u>enter</u>	the name of the new register
Enter Florida street addre	.xs
	lorida Zip Code
	Liability Company) were filed on MARCH 05, 20 mility company here: lity Company," the designation "LLC 2111 E BIRD STREET, TAMPA, FL. 33604 2111 E BIRD STREET, TAMPA, FL. 33604 address on our records, enter

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
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effective date is li	other than the date of sted, the date must be spe serted in this block do	ecitic and cannot be pr	ior to date of filing or	r more than 90 days at	itional) ter filing.) Pursuant to 6 his date will not be 1	505.020 isted as
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ument's effectiv	delayed effective date.					
ument's effectiv		2022	—· . /			
cord specifies a stilled.	EMBER		mull o	ive of a member		

Filing Fee: \$25.00