L19000197420

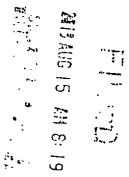
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GEORGE Marray LCC Name of Limited/Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
GEOLGE MULLAY Name of Person
GEORGE MURRAY LCC
1265 Lane AUE South #7
JACKSONVILLE F/9 32205 City/State and Zip Code
Murray George 72 9 gmail : Com E-mail address: to be used for future annual report notification)
For further information concerning this matter, please call:
GEORGE MURRAY Name of Person at GOU 601-6072 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solutional copy is enclosed Solutional Copy Solutional C

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**

GEORGE MURRAY	1 LLC					
(Name of the Limited Liability 0 (A Florida Lir	ompany as it now appears on nited Liability Company)	our records.)				
The Articles of Organization for this Limited Liability Com Florida document number <u>L19000197420</u> .	pany were filed on <u>OS</u>	' 02 - 20	<u>019</u> a	nd assiş	gned	
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited	liability company here:					
					<u> </u>	
The new name must be distinguishable and contain the words "Limited	Liability Company," the design	ation "LLC" or th	e abbreviat	ion "L.L.	.C."	
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRES	<u> </u>					
	 					
Enter new mailing address, if applicable:				~		
(Mailing address MAY BE A POST OFFICE BOX)			<u> 20</u>	# 24 married		
			11.74	P		
B. If amending the registered agent and/or register	ed office address on ou	r records, <u>ent</u>	er the 1	ıame o	of the nev	7
registered agent and/or the new registered office address	s here:		- 1	器 69		
Name of New Registered Agent:						
New Registered Office Address:	Enter Florida si	treet address				
		, Florida				
	City	,	Zip	Code		
New Registered Agent's Signature, if changing Registered A	gent:					

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 **Type of Action Address** Title Name 1 Norlishia M Lawrence 8848 Arbor Breeze La ☐ Change MGR GEORGE MURTAY 6479 crimson leaf Lane ☐ Remove ☐ Change Norlishia M Lawrance 8848 ARbor Broeze LA WAdd ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change ☐ Add □ Remove ☐ Change □ Add

☐ Remove

☐ Change

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If an effe Note:	we date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated ₋	Signature of a member or authorized representative of a member GEORSE MULLLY Typed or printed name of signee
	Signature of a member or authorized representative of a member
	(SEROPCE ANIBORKI)

Page 3 of 3

Filing Fee: \$25.00