

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer:	

Office Use Only



800334751228

(P- F) (N--6.131--611 ++66.0)



SULKER OCT 1 6 2019

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
	The Wood	Monk ELC		
SUBJI	ECT:			
		Name of Limi	ted Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
		Edward Andrew Miller		
			Name of Person	
		The Wood Monk LLC		
			Firm/Company	
		10023 Rose Petal Pl		
			Address	<del></del>
		Riverview, FI 33578		
		Andrewm465@gmail.com	City/State and Zip Code	
		~	to be used for future annual report notifi	cation)
For fu	rther information co	oncerning this matter, please ca	all:	
Edwa	ard Andrew Miller		863 837-8360	
			at ()Daytime	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
□ <b>\$</b> 2	5.00 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 ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Wood Monk LLC (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 Company were filed on August 09, 2019 and assigned Florida document number \_\_\_\_ L19000203732 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 address on our records, enter the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

## 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>	<u>Address</u>	Type of Action
AMBR	Edward Andrew Miller	10023 Rose Petal Pl Riverview fl 33578	
		33310	Add
			Remove
			Change
		<del></del>	Add
			□ Remove
			Change
		<u> </u>	□ Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
	<del></del>		
			Remove
			□ Change

2. A finending any other	information, enter change(s) here: (Attach additional sheets, if necessory.)
<del></del>	
	1 t-**-
(If an effective date is fisted, th Note: If the date inserted	than the date of filing:(optional) ne date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 K in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
f the record specifies a b) The 90th day after	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: the record is filed.
September 25	2019
Dated	Signature of a member or authorized representative of a member
Edurad	Holosof 971/kg. Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00