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COVER LETTER

то:	Registration Se Division of Cor				
CTIB 112					
SORTE	CI:	Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		Eric Gormley			
			Name of Person	·	
		Gormley ABA LLC			
	Gormley ABA LLC Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Eric Gormley				
		378 NE Surfside Avenue			
			Address		
		Port St. Lucie, FL 34983			
			City/State and Zip Code		
For furt	her information c			uncation)	
Eric Go	rmley				
	Name o	f Person	Area Code Daytii	me Telephone Number	
Enclose	d is a check for th	ne following amount:			
■ \$25	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
	Mailing Addres Registration 5		Street Address: Registration S	ection	
	Division of C	Corporations	Division of Co	Division of Corporations	
	P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CADA II C		
Gormley ABA LLC		
(Name of the Limited I	Liability Company as it now appears on our record	<u>is)</u> 27 7
(A	Piorida Emined Etability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on December 02, 20	19 and assigned
Florida document number L19000294434		93. T
rionda document number	<u>-</u> -	변환 유
This amendment is submitted to amend the followi	ng:	<u> </u>
A. If amending name, enter the new name of th	e limited liability company here:	
Eric Gormley LLC		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
• •	mend the following: new name of the limited liability company here: Indicate the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ress, if applicable: BE A STREET ADDRESS) ST OFFICE BOX) gent and/or registered office address on our records, enter the name of the new registered office address here: d Agent:	
(Principal office address MUST BE A STREET A	e following: me of the limited liability company bere: h the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." pplicable: TREET ADDRESS) Example: ICE BOX) Wor registered office address on our records, enter the name of the new registered ddress here: Enter Florida street address Florida	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or regi	stered office address on our records, enter	the name of the new registered
agent and/or the new registered office address h	iere:	
- 		
Name of New Registered Agent:		
The state of the s		
New Registered Office Address:		
rea registered Office reduces.	Enter Florida street addre	SS
	, F1	orida
-		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	Elizabeth Vargas	829 SE Cavern Avenue	■Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			□Remove
			☐ Change
		-	□Remove
			Change
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·****		-	
Effective date, if other than the (If an effective date is listed, the date im Note: If the date inserted in this bedocument's effective date on the limit of the	ist be specific and cannot be prior to date block does not meet the applicable s	(optional) c of filing or more than 90 days after filing.) Is statutory filing requirements, this date w	Pursuant to 605.0207 (3 rill not be listed as th
he record specifies a delayed effecti ord is filed.	ve date, but not an effective time, a	t 12:01 a.m. on the earlier of: (b) The	90th day after the
December 14 Dated	2019		
	The Mest		
	Signature of a member or authorized	representative of a member	

Filing Fee: \$25.00

Typed or printed name of signee