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COVER LETTER

TO: Registration So Division of Co		nited Liability Company				
	BEDELL, PLLC	The second secon				
SUBJECT:		nited Liability Company				
		ry.				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
•	Ū	•				
	MEREDITH TESS BEDE	ELL				
		Name of Person				
	M. TESS BEDELL, PLLC	i				
	Firm/Company					
	124 SOUTH MORGAN S	TREET, APT, 4309				
		Address				
	TAMPA, FLORIDA 3360	12				
		City/State and Zip Code				
	tess.bedell@gmail.com					
	E-mail address: ((to be used for future annual report notification)				
For further information of	concerning this matter, please c	all:				
MEREDITH TESS BEI	DELL.	727 687-3024				
Name of Person		at () Area Code Daytime Telephone Number				
Enclosed is a check for t	he following amount:					
≅ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Addre Registration Division of C	Section Corporations	Street Address: Registration Section Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO OF

ARTICLES OF ORGANIZATION M. TESS BEDELL, PLLC

Contraction of the second (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 March 5, 2020 _____ and assigned 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 "LLC." 124 SOUTH MORGAN STREET, APT. 4309 Enter new principal offices address, if applicable: TAMPA, FLORIDA 33602 (Principal office address MUST BE A STREET ADDRESS) 124 SOUTH MORGAN STREET, APT. 4309 Enter new mailing address, if applicable: TAMPA, FLORIDA 33602 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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>	Name	Address	Type of Action
AMBR	MEREDITH TESS BEDELL	124 SOUTH MORGAN STREET, APT, 4309	🗆 Add
		TAMPA, FLORIDA 33602	□Remove
			🗏 Change
			🗆 Add
			□Remove
			□Change
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Note: 1	ve date, if other the ctive date is listed, the fithe date inserted int's effective date of	n this block does	not meet the ap	plicable statuto	ng or more than 90 ry filing requirem	(optional) days after filing.) Pur tents, this date will	suant to 605,0207 (not be listed as t
e record rd is file	specifies a delayed d.	effective date, bu	ut not an effecti	ve time, at 12:0	l a.m. on the earl	ier of: (b) The 90	th day after the
Dated _	May 5		2020	·			
		M. 2	7=7	3			
		Signature	of a member or	authorized repres-	entative of a membe	ет	

Filing Fee: \$25.00