K20000105819

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)

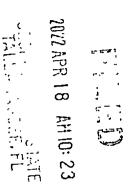
(Document Number)
rtified Copies Certificates of Status
pecial Instructions to Filing Officer:

Office Use Only



000385701310

04/18/22---01035-+016 **30.00



P 10/1/2002

Registration Section Division of Corporations enclosed Articles of Amendment and fee(s) are submitted for filing. se return all correspondence concerning this matter to the following: ansha McMillan
Name of Person M.Milan Mubile Notary Attantic Blvd Ste 130 Address City/State and Zip Code E-mail address: (to be used for future annual report notification) rther information concerning this matter, please call: ed is a check for the following amount: ☑ \$30.00 Filing Fee & 5.00 Filing Fee ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION **OF**

MMillan Mobil	e Notay, LLC	2022 APR 18 AH 10: 23
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our record Liability Company)	S) SEUTT
Articles of Organization for this Limited Liability Company ida document number <u>しるのめの 105919</u> .	y were filed on 14 M2	and assigned
amendment is submitted to amend the following:		
f amending name, enter the new name of the limited liab	oility company here:	
MEMillan &	CO. LLC	
ew name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
r new principal offices address, if applicable:	12230 Atlantic	Bird Ste 130
cipal office address MUST BE A STREET ADDRESS)	<u> # 1030 </u>	
	THEKSINNING FR	32225
new mailing address, if applicable:	12220 Atlantic	Blvd Stel30
ng address MAY BE A POST OFFICE BOX)	4.1030	
	JACKSONVILLE, FC	32225
mending the registered agent and/or registered office and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		· -
	Enter Florida street address	
	, Flor	ida
	City	Zip Code
istered Agent's Signature, if changing Registered Agent:		

accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ne obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ed to merely reflect a change in the registered office address. I hereby confirm that the limited liability has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

emoved from our records:

GR = Manager IBR = Authorized Member

<u>e</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
-			□Add
			□Remove
			□Change
			□Add
		 	□Remove

e	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
_	
_	
_	
_	
_	
_	
_	
	
_	
_	
_	
	ve date, if other than the date of filing: DHH BDD (optional) clive dates is listed, the date must be specific and cannot be prior to date of filing or new than 90 days after filing.) Pursuant to 605.0207 (3)th) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the off seffective date on the Department of State's records. specifies a delayed effective date, but not an effective time, at 12.01 a.m. on the earlier of: (b) The 90th day after the Signature of a member or authorized appresentative of a member Tanka. Me Millan.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	l.
	<u>-</u>
	Signature of a member or authorized representative of a member
	Typed or printed name of signee