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SUBJEC	Williams S	yfrett & Garmon, PLLC		\	# 2			
SUBJEX		Name of Limited Liability Company						
			. 10 50					
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please re	turn all correspo	ndence concerning this matter	to the following:					
		Stephen Syfrett						
			Name of Person	· · ·	_			
		Williams & Syfrett, PLLC						
			Firm/Company		_			
		502 Harmon Avenue						
			Address		_			
		Panama City, FL, 32401						
			City/State and Zip Code		_			
		stephen@wsgfirm.com			_			
		E-mail address: (to be used for future annual repo	ort notification)	-33	70.		
For furth	er information c	oncerning this matter, please c	all:		ا با است دری در ستو	2021 APR		
Stephen	Syfrett		850 763-5.	368		% -9		
	Name o	f Person		Daytime Telephone Numb	per			
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Enclosed	I is a check for th	ne following amount:				99 GU		
■ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclose	d) Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)			
	Mailing Addres Registration 5		<u>Street Addr</u> Registratio					

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Williams Syfrett & Garmon, PLLC (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 $\frac{01-05-2021}{1}$ and assigned Florida document number $\underline{\frac{1.21000016255}{}}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Williams & Syfrett, PLLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) 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 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

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
AMBR	Eric R. Garmon	502 Harmon Avenue, Panama City, FL, 32401	□Add
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Dated	April 7		<u>/</u> .	2021	_ ·					
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Filing Fee: \$25.00