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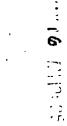
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(/ PICK-UP  (I  Certified Copies	☐ WAIT	MAIL
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(A) (A) (C) (C) (D) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	_ Certificates of Sta	atus
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Office Use Only



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A. RIVERS

JUL 1 6 2023

## **COVER LETTER**

TO:

Registration Section Division of Corporations

	RAN & SIMMONS, PLLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Augustin G. Simmons, Esc	1.	
		Name of Person	
	Firm/Company  2080 McGregor Blvd., Suite 101  Address  Fort Myers, FL 33901  City/State and Zip Code  E-mail address: (to be used for future annual report ation concerning this matter, please call:  nons, Esq.  Name of Person  Area Code  Day  Area Code  Certificate of Status  Certified Copy (additional copy is enclosed)  Address:  Ition Section  To of Corporations  To of Corporations  The Centre Country  The Centre Country  The Centre Country  The Centre Country  City/State and Zip Code  City/State and Zip Code  E-mail address:  Ethical Code  To other Code  Street Address:  The Centre Code  The Centre Code  The Centre Code  City/State and Zip Code  City/State and Zip Code	<del></del>	
	2080 McGregor Blvd., Sui	te 101	
		Address	
	Fort Myers, FL 33901		
		City/State and Zip Code	· <del>-</del>
	E-mail address: (	to be used for future annual report not	fication)
For further information c	oncerning this matter, please ca	all:	
Augustin G. Simmons, Esq.		at ( )	
Name of Person		Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		<u>Street Address:</u> Registration Se Division of Co	
P.O. Box 632	7	The Centre of	Fallahassee
Tallahassee, l	·L 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

O'HALLORAN & SIMMONS, PI	.LC						
( <u>Name of the Lim</u>	ited Liability Compa (A Florida Limited	i <mark>ny as it now appears on our re</mark> Liability Company)	ecords.)				
	Liability Company	were filed on 02/19/2021		and assign	ied		
This amendment is submitted to amend the fol	lowing:						
SUITE 101							
SIMMONS & COOK, PLLC							
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abb	reviation "L.L.C			
Enter new principal offices address, if applicable:		2080 MCGREGOR BLVI	D.				
(Principal office address MUST BE A STRE	ET ADDRESS)	SUITE 101					
	-	FORT MYERS, FL 3390	1				
Enter new mailing address, if applicable:		2080 MCGREGOR BLVI	D.				
(Mailing address MAY BE A POST OFFICE BOX)		SUITE 101					
		FORT MYERS, FL 3390	1	) 0 0 0 0 0 0			
		address on our records, <u>e</u>	nter the name	of the new r	<u>egister</u>		
Name of New Registered Agent:	AUGUSTIN G. SIMMONS			. 5	·		
New Registered Office Address:	2080 MCGREGOR BLVD., SUITE 101						
		Enter Florida street a	ddress				
	FORT MYERS		_, Florida3390	01			
		City		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
AMBR	RYAN O'HALLORAN	2080 MCGREGOR BLVD.	□Add
		SUITE 300	■ Remove
		FORT MYERS, FL 33901	☐Change
AR	NICOLE COOK	2080 MCGREGOR BLVD.	⊟∧dd
		SUITE 101	□Remove
		FORT MYERS, FL 33901	□Change
	<del>-</del>		□Add
			□Remove
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<u>te:</u> If	e date, if other the date is listed, the date inserted atts effective date	in this block doe	es not meet i	the applicable	2023 late of filing or restatutory filin	nore than 90 da ng requiremen	(optional) ys after filing, its, this date	) Pursuant to 60: will not be fist	5,020 ted a
cord s filed	specifies a delaye 1.	d effective date,	but not an e	ffective time	, at 12:01 a.m.	on the earlier	of: (b) The	e 90th day afte	er the
ed _	May 1	<u>′5</u>	<u>2</u>	2023					
			7						
		Signatu	uro af a memb	er or authorize	ed representativ	of a member			