3/20/2024 11:59:48 PGT



To: 18506176383

Page: 2/4

Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•;

Small Family Companies, LLC

(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 03/05/21 and assigned Florida document number L21000108500

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 Liabitity Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

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Name of New Registered Agent:		- ; ; ;	ĦΑ	. "I
New Registered Office Address:			R 20	·
	Enter Florida street address	50.	РМ	1
	Florid	<u></u> _	<u> i</u>	0
	Cuy	ATE	ling of	ι *

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.

3/20/2024 11:59:48 PDT To: 18506176383 Page: 3/4 Fax: 8134365206 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 Title Name Address **Type of Action** Small, Tricia 7901 4th St N STE 300 AMBR _____ ZìAdd St. Petersburg, FL 33702 _____ 🗆 Remove _____ 🗆 Add Change _____ 🗆 🖂 🖂 🖂 🖂 _____ FlChange ______ í ¯}Add _____ Change □Add LIRemove

_____ 🖸 Add

_____ 🗆 Change

To: 18506176383

Page: 4/4

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than th (If an effective date is listed, the date m <u>Note:</u> If the date inserted in this	e date of filing:	ot be prior to date of fil	ing or more than 90 days	optional) after filing) Pursuant to 605	0707 (N
Note: If the date inserted in this l	block does not meet t	he applicable statuto	ry filing requirements	s, this date will not be list	ed as the
document's effective date on the	Department of State's	s records.			
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the record specifies a delayed effect cord is filed.	ive date, out not an ef	recuve anne, at 12:0	r a.m. on the earlier (n. (o) i ne voar oay anei	r uic
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March 201-					
Dated March 20th					
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	Signature of a memb	er or authorized repres	entative of a member		

Robin Jones

Typed or printed name of signee

Filing Fee: \$25.00