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COVER LETTER

S.C.0.G LI	.C				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Andrea Richards				
		Name of Person			
	Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing. rrespondence concerning this matter to the following: Andrea Richards Name of Person S.C.O.G LLC Firm/Company 7221 nw 16th street Address Plantation, Fl 33313 City/State and Zip Code andmcf12@gmail.com E-mail address: (to be used for future annual report notification) attion concerning this matter, please call: 954 2261827 at (
		Firm/Company			
	7221 nw 16th street				
	Address				
	Plantation, Fl 33313				
	andmcf12@gmail.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report notif	lication)		
For further information of	concerning this matter, please ca	all:			
Andrea Richards		954 2261827			
Name o	of Person	at () Area Code Daytime	e Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee					

TO:

Registration Section **Division of Corporations**

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number 1.21000120982	pany were filed on 03/15/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
S.C.O.G. LLC		
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	1689 40th street, West Palm Beach FL, 3	3407 ——————
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1689 40th street, West Palm Beach FL, 3	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, enter the name	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 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
MGR	Vincent Richards	8533 Claridge Drive Miramar Fl 33025	□Add
		Change / Vincent Richards	= Remove
		to Authorized member or VP	= Change
MGR	Andrea Richards	7221 nw 16th street apt c265. Plantation FL, 33313	🗆 🗅 Add
		Addrew Richards / Mgr/	□Remove
		Andrew Richards / Mgr/ President	□Change
			🗆 Add
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fective date, if other than th	e date of filing:		S 8717	(optional)	
an effective date is listed, the date mote: If the date inserted in this	ust be specific and cann block does not meet t	of be prior to date the applicable st	of ming or more than atutory filing requi	rements, this date wi	Il not be listed as t
ocument's effective date on the	Department of State	s records.			
record specifies a delayed effect	ive date, but not an e	ffective time, at	12:01 a.m. on the	earlier of: (b) The S	Oth day after the
is filed.					
Sept. 09	20)21			
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An	dea Ri Signature of a memb	hand- er or authorized r	7 epresentative of a me	ember	

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