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(Requestor's Name)
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, , , , , , , , , , , , , , , , , , ,
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COVER LETTER

TO: Registration So Division of Cor			
	racting LLC		, , , , , , , , , , , , , , , , , , ,
SUBJECT:	Name of Lin	nited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	2022 HA
Please return all correspo	ondence concerning this matter	to the following:	
	Renee Brown		SEE.
		Name of Person	
	Brown's Tax & Accounting	g	े <i>र</i>
	•	Firm/Company	
	20741 Central Ave E		
	•	Address	
	Blountstown, FL 32424		
		City/State and Zip Code	
	brownstax@fairpoint.net		
		to be used for future annual report no	otification)
For further information of	oncerning this matter, please c	eall:	
Renee Brown		850 674-4100 at ()	
Name o	f Person		me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address: Registration S	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 632		The Centre of	Tallahassee
Tallahassee, 1	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLE'S OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our records.) Liability Company)	
y were filed on 03/22/21 @and signed	
oility company here:	
oility company here:	
ility Company," the designation "LLC" or the abbreviation "L.E.C."	
5536A Alliance Road	
Marianna, FL	
32448	
5536A Alliance Road	
Marianna, FL	
32448	
address on our records, enter the name of the new registered	
address on our records, enter the name of the new registered	
Enter Florida street address, Florida	
Enter Florida street address, Florida City Zip Code	
Enter Florida street address, Florida	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to marrage, 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>	<u>Address</u>	Type of Action
AMBR	Theo Jordan Hobbs	11452 NW Caylyn Drive	■ Add
		Bristol, FL 32321	□ Remove
			Change
			□Add
		~ 	□ Remove
			☐ Change
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Page 2 of 3

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(If an ef Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	May 13 2022
	h. n. A. O.
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	William Skyler Scott

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Filing Fee: \$25.00