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## **COVER LETTER**

SUBJECT.	_	•			
SUBJECT:		Name of Lim	ited Liability Company	<del></del>	
Please return	n all correspo	indence concerning this matter	to the following:		
		Brooke Cobbin			
			Name of Person		
		Pearl Morgan Enterprises,	LLC		
	Sed Articles of Amendment and fee(s) are submitted for filing.  Image of Person  Pearl Morgan Enterprises, LLC:  Firm/Company  42 Verdure Street  Address  St. Johns, FL 32259  City/State and Zip Code  pearlmorganlle@gmail.com  E-mail address: (to be used for future annual report notification)  r information concerning this matter, please call:  obbin  Name of Person  Part Morgan Enterprises, LLC:  Firm/Company  42 Verdure Street  Address  St. Johns, FL 32259  City/State and Zip Code  pearlmorganlle@gmail.com  E-mail address: (to be used for future annual report notification)  r information concerning this matter, please call:  obbin  Obbin  Obbin  Obbin  Object St. Johns St. Jo				
		42 Verdure Street			
			Address		
		St. Johns, FL 32259			
			City/State and Zip Code		
				ilication)	
For further i	nformation c	oncerning this matter, please co	all:		
Brooke Cob	bin				
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is	a check for th	ne following amount:			
□ \$25.00 °	Filing Fee		Certified Copy	Certificate of Status & Certified Copy	
				ection	
Division of Corporations		Division of Co	Division of Corporations		
	O. Box 632 Ilahassee, I			Tallahassee oc Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pearl Morgan Enterprises, LLC		
(Name of the Limited Liab (A Flor	ility Company as it now appears on our rec ida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability lorida document number L21000208118	Company were filed on 5/4/2021	and assigned
	<del></del> ·	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the li	mited liability company here:	
Drewcob Properties, LLC		
he new name must be distinguishable and contain the words "L	imited Liability Company," the designation "L	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Same	202
Principal office address MUST BE A STREET ADI	ORESS)	
The part office and early meet all meets and a second		1, 3
		σı .
	Same	
inter new mailing address, if applicable:	<del></del>	- 10
Mailing address MAY BE A POST OFFICE BOX)		<del>_</del>
3. If amending the registered agent and/or register gent and/or the new registered office address here		ter the name of the new regis
Name of New Registered Agent: N/A		
New Registered Office Address:	Enter Florida street ada	desire
	Enter Profitta street dat	41 6.70
	,	FloridaZip Code
	$\cup n_V$	zap Couc

## 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
AMBR	Drew M. Cobbin	42 Verdure Street, St. Johns, FL 32259	<b>=</b> Add
			□Remove
			□ Change
			□Remove
			]Change
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If an effective date is li Note: If the date in	ther than the date of filing: sted, the date must be specific and cannot serted in this block does not meet the te date on the Department of State's r	be prior to date of filing or it applicable statutory fili	(optional nore than 90 days after filing ng requirements, this dat	g.) Pursuant to 605.0207 :
e record specifies a ord is filed.	lelayed effective date, but not an effe	ective time, at 12:01 a.m.	on the earlier of: (b) T	The 90th day after the
Dated August 13	${}$	<u> </u>		
	Agnature of a member	or authorized representative	e of a member	
		/ *		