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(Reque	estor's Name)	
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## **COVER LETTER**

TO: Registration Se Division of Cor				. •			
SUBJECT: Head	ther Lee Wil	SUM PLLC		• .			
,	Name of Limi	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:					
	Hewther L	ee Huston Name of Person	SECRET TALL	2023 FEB			
	Heather Lea	Haston PLLC Firm/Company	ARY OF	9-			
	50 8th A	ve SW unit#	1755 PAR	AM 10: 10			
	Laugo, H	City/State and Zip Code					
	heuther @ (	OLF INVEST ME to be used for future annual report noti	MTS.COH				
For further information co	oncerning this matter, please ca	all:					
Hewther Wanter	21 Hushon FPerson	at ( <u>127</u> ) <u>148</u> - Area Code Daytim	3GCU e Telephone Number				
Enclosed is a check for th	ne following amount:						
▼ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of State Certified Copy (additional copy is encl.)	icate of Status & ied Copy			
Mailing Addres Registration S		<u>Street Address:</u> Registration Sc					
Division of Corporations P.O. Box 6327		Division of Cor The Centre of T					

Tallahassee, Fl. 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite)	d Liability Compan A Florida Limited Li	y as it now appears on our records.) ability Company)	<del></del>
The Articles of Organization for this Limited Lia Florida document number L2100021  This amendment is submitted to amend the followant for the new name of the new name of the new name must be distinguishable and contain the work the new principal offices address, if application (Principal office address MUST BE A STREET)	wing:  the limited liabil  Charles "Limited Liabiliabiliabiliabiliabiliabiliabiliabi	lity company here:	and assigned  2023 FEB - 6 MH III SECRETARY OF SHAPE AND SEER AND
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	<u>80X)</u>	50 8th Ave S.W. L Layo, FC 33779	unit#1755
B. If amending the registered agent and/or reagent and/or the new registered office address		ddress on our records, <u>enter the na</u>	ame of the new registered
Name of New Registered Agent: New Registered Office Address:	Neuth 50 8th	Ave S.W. Unit#1-	155
	Torso	. Florida	33779 Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

1 los Hagy i as

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

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-							RY OF STAT	6 AH 10:	
an eff	fective date is listed, th	than the date of the date must be specif thin this block does	fic and cannot be	prior to date	of filing or more	(option than 90 days after requirements, this	filing.) Pur	suant to 6	 :05:020'
ocum	ent's effective date	e on the Departmen	at of State's rec	ords.					
	Feb à	3	20	<u>33</u> .					
		Signature	of a member or	Authorized re	epresentative of	a member		<u> </u>	
		Heathe	Y LOG	Has printed name	of signee				