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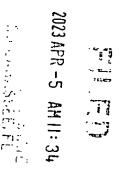
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	:y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	Registration Se Division of Cor		
oun in		S N THINGS LLC	
SUBJEC	JI:	Name of Lim	ited Liability Company
		·	
The encl	losed Articles of	Amendment and fee(s) are sub	emitted for filing.
Please re	eturn all correspo	ondence concerning this matter	to the following:
		GERALD SEABURY	
			Name of Person
		G'S WINGS N THINGS L	LC
			Firm/Company
		10810 BOYETTE RD, NU	JM 234
			Address
		RIVERVIEW, FL 33569	
			City/State and Zip Code
		GEESWINGSNTHINGS@	
For furth	ner information c	e-man address: (oncerning this matter, please c	to be used for future annual report notification) all:
	D SEABURY		631 633-6635
		f Person	at () Area Code Daytime Telephone Number
	Name 0	i i Cisoli	Area code Daytine Telephone Number
Enclosed	l is a check for th	ne following amount:	
■ \$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Section
	Division of C	orporations	Division of Corporations
	P.O. Box 632 Tallahassee, I		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	i aiiaiiassee, l	(L. VEV LT	Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G'S WINGS N THINGS LLC						
(Name of the Limi	ted Liability Comps (A Florida Limited	ny as it now appear: Liability Company)	s on our records.)			
he Articles of Organization for this Limited L	iability Company	were filed on 06/0	03/2021	a	nd ass	igned
lorida document number L21000259225	·					
nis amendment is submitted to amend the foll	owing:					
. If amending name, enter the new name o	f the limited liab	ility company he	<u>re</u> :			
/A						
e new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the de	signation "LLC" or tl	he abbrevia	tion "L.	IC."
nter new principal offices address, if applic	able:	N/A				
Principal office address MUST BE A STREE	T ADDRESS)	N/A			70	
		N/A			73 A	
				1	PS -	, ह्या , ह्या
Enter new mailing address, if applicable:		N/A		<u>.</u> }:	بی	-
Mailing address MAY BE A POST OFFICE	BOX)	N/A)) (()	7	
	N/A		7°(−n⊊		100	
				:	Ŧ	
. If amending the registered agent and/or agent and/or agent and/or the new registered office addre	C)	address on our re	cords, <u>enter the </u>	name of t	<u>he nev</u>	<u>registe</u>
ent and/of the new registered office addition	sy nere .					
Name of New Registered Agent:	N/A		 .			
New Registered Office Address:	N/A					
		Enter Flori	da street address			<u> </u>
	N/A		, Florida	N/A		
		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
AP	JERRELL M SEABURY	11759 WINTERSET COVE DR	□Add
		RIVERVIEW, FL 33579	□Remove
			■ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			□Change
	**************************************		□ Add
		<u> </u>	Remove
			☐ Change

PLEASE LIST JERRELL M	SEABUR	CY AS	AN AU	HORIZ	ED REP	RESENT	ATIVE	-			-
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Effective date, if other than the	late of f	filina	N/A					(option	ial)		
If an effective date is listed, the date mus Note: If the date inserted in this blo											
document's effective date on the De							1				
e record specifies a delayed effective	date, but	t not an	effectiv	e time, a	12:01 a	.m. on th	e earlier	of: (b)	The 90	th day afte	er the
rd is filed.											
MARCH 29TH			2023								
Dated	1	—· .		·							
	/	//									
//	100	//		_							
	Signature	of a me	mber or a	uthorized	represent	ative of a	member				

EII E 005.00