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SECRETARY OF STATE OF CORPORATIONS

T. MATTHEWS JUN 24 2022

COVER LETTER

TO:

	Registration Se Division of Cor			•	•	. ,
orm rez	Specialty F	Retail Group LLC	•	* .	•	
SUBJEC	A:	Name of Lim	ited Liability Company	y		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		Robert Darrow				
		·	Name of Person	1		_
		Specialty Retail Group, LI	LC			
			Firm/Company	,,,		_
		1061 S. Sun Drive Suite 10	097			
			Address			_
		Lake Mary, FL 32746				
			City/State and Zip (Ode	. '=	_
		bobdarrow@outlook.com				
		E-mail address: (to be used for future ar	mual report notifi	ication)	
For furth	er information c	oncerning this matter, please co	all:			
Robert [Эагт оw		407 at (739-6616		
	Name o	f Person	Area Code	Daytime	Telephone Numbe	Г
Enclosed	l is a check for th	ne following amount:				
■ \$25. 0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Certified Cop (additional copy	у	Certified	ite of Status &
	Mailing Addres			et Address:		
Registration Section		Registration Section				
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Division of Corporations The Centre of Tallahassee			
			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO SECRETARY OF STATE DIVISION OF CORPORATIONS ARTICLES OF ORGANIZATION

OF

Specialty Retail Group, LLC

company has been notified in writing of this change.

22 MAY -3 AM 11: 54

(Name of the Limited Liability Company as it now appears on our records.)

ny were filed on July 2	and assigned	
ability company here	:	
bility Company," the desig	gnation "LLC" or the abbreviation "L.L.C."	
e address on our reco	ords, <u>enter the name of the new register</u>	
Fice Address: Enter Florida street address		
	, Florida Zip Code	
•	Zip Code	
<u>ıt:</u>		
	e address on our reco	

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

If Changing Registered Agent, Signature of New Registered Agent

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	Robert Kubier	1061 S. Sun Drive	□ Add
		Suite 1097	Remove
		Lake Mary, FL 32746	
			□Add
			□ Remove
			□ Change
			□ Remove
			☐ Change
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Effective date, if other than the fan effective date is listed, the date inserted in this document's effective date on the	block does not me	et the applicable	te of filing or more th statutory filing req	optional an 90 days after filin uirements, this dat	l) g.) Pursuant to 605.0207 (e will not be listed as t
e record specifies a delayed effect d is filed.	ctive date, but not ar	n effective time, :	at 12:01 a.m. on th	e earlier of: (b) 3	he 90th day after the
Dated April 28		2022			
	Tet 12	nr			
***	Signature of a me	mber or authorized	representative of a	member	
	Robert	11 7	.)		
·	NOVERT T	yped or printed na	me of signee		· · · · · · · · · · · · · · · · · · ·

Filing Fee: \$25.00