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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

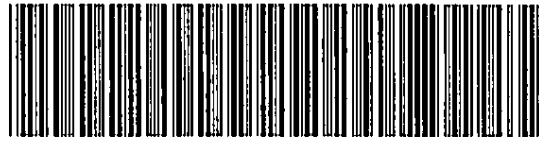
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COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: INGRAM LAW GROUP, P.A.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT W. INGRAM
Name of Person

INGRAM LAW GROUP, P.A.
Firm/Company

943 LAKE ASBURY DRIVE
Address

GREEN COVE SPRINGS, FL 32043
City/State and Zip Code

MOLLYHATCHETBAND@AOL.COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

ROBERT INGRAM at 904 657-1488
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

INGRAM LAW GROUP, P.A.

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

The Articles of Organization for this Limited Liability Company were filed on 8/5/2021

Florida document number L21000356983

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and assigned

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

INGRAM LAW FIRM .P.A.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

943 LAKE ASBURY DRIVE

(Principal office address MUST BE A STREET ADDRESS)

GREEN COVE SPRINGS, FL 32043

Enter new mailing address, if applicable:

943 LAKE ASBURY DRIVE

(Mailing address MAY BE A POST OFFICE BOX)

GREEN COVE SPRINGS, FL 32043

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: ROBERT W. INGRAM

New Registered Office Address: 943 LAKE ASBURY DRIVE

Enter Florida street address

GREEN COVE SPRINGS, Florida 32043

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.

Robert Ingram
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>	<u>Address</u>	<u>Type of Action</u>
MGR	ROBERT W. INGRAM	943 LAKE ASBURY DRIVE	<input checked="" type="checkbox"/> Add
		GREEN COVE SPRINGS, FL 32043	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

102 JUN 13 11:08 AM '08

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Lined area for amending information.

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated June 30, 2022

Robert Ingram Signature of a member or authorized representative of a member

ROBERT W. INGRAM Typed or printed name of signee