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(Document Number)
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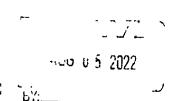
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MURPHY AT LAY	W, LLC	
DOCUMENT NUME		<u>-</u>	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Danny Murphy		
		Name of Contact Persor	1
		Firm/ Company	
	1500 Monument Rd., Apt. 41	0	
Addres			
	Jacksonville, FL 32225		
		City/ State and Zip Code	2
	danny@successstory.biz		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Danny Murphy		at ( <u>904</u>	566-6634
Name of Contact Person Area Code & Daytime Telephone S		de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303





FLORIDA DEPARTMENT OF STATE Division of Corporations

June 4, 2022

DANNY MURPHY 1500 MONUMENT ROAD APT 410 JACKSONVILLE, FL 32225

SUBJECT: MURPHY AT LAW, LLC Ref. Number: L21000422004

We have received your document for MURPHY AT LAW, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 922A00012537

Claretha Golden Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Murphy at L	Law. LLC	2022 AUC -5 AM 9: 06
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 2 I D D D 4 22 004</u> .	were filed on Sept 24,2	021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab  Floring Wewcomer, LLC  The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Dariel Burph 5846 Mount Jacksonville,	LANGE / TEHNOR
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5846 Moght Apt. 1402 Jacksonville	Carmel Terrace
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
<del></del>	, Flori	ida Zip Code
	City	гір Сойе

## 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 Changing Registered Agent, Signature of New Registered Agent

If am Ading Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager
ABSTATA	

	G	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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fan effective dat <mark>Note:</mark> If the da	ite inserted in th	e must be specific is block does r	c and cannot be prior	able statutory filin	ore than 90 days after g requirements, this	onal) filing.) Pursuant to 605.0203 date will not be listed as
	es a delayed effe	ective date, but	not an effective ti	.me, at 12:01 a.m. (	on the earlier of: (b	) The 90th day after the
record specific d is filed.						
d is filed.	.45d 1	) 	_, <u>2027</u>	<u> </u>		
d is filed.	45t 1	I Mur	7 2027	orized representative	of a member	