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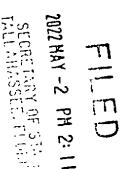
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COVER LETTER

TO:

Registration Section Division of Corporations

TEAM NEAL ENTERPRISES LLC SUBJECT: 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: MICHAEL J NEAL Name of Person TEAM NEAL ENTERPRISES LLC Firm/Company 15736 WOODGATE COURT Address SUNRISE, FL 33326 City/State and Zip Code MICHAELNEAL00@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MICHAEL J NEAL 954 673-6219 Name of Person Daytime Telephone Number Area Code Enclosed is a check for the following amount: ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEAM NEAL ENTERPRISES LLC

(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 w	ere filed on 11/02/2021	and assimed
Florida document number L21000473814		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, <u>ente</u>	er the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ress
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

New Registered Agent's Signature, it 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addeor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	VERNICA JOHNSON NEAL	15736 WOODGATE COURT	⊞ Add
		SUNRISE, FL 33326	□Remove
			□Change
		□Add	
		□Remove	
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
		-	□Add
			Remove
			□Change

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Effective	date, if other than the date of filing: (optional)
	ive 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
f an effect	the date inserted in this block does not meet the applicable statutory flying requirements, this date will not be listed as
f an effect Note: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t's effective date on the Department of State's records.
f an effect Note: If document	t's effective date on the Department of State's records.
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May 08, 2022 15736 Woodgaten Prourt AM 7:53 Sunrise, FI 33326 CIRCLIAN SEE, FL

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FI 32314

ref: Team Neal Enterprises LLC additional Manager added

On April 26 I forwarded the attached documents requesting that an additional manager be added to my LLC:

Vernica J Neal 15736 Woodgate Court Sunrise, FL 33326

However, it appears that she was not added. Please review the attached documentation and please add the aforment/oned person.

Thanks in/advance,

Michael J. Neal