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COVER LETTER

TO:	Registration S Division of Co			i ,
cunt	S Gruber /	Agency, LLC	•	
SUBJE	.CI:	Name of Lim	ited Liability Company	
The end	rlosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please t	return all corresp	ondence concerning this matter	to the following:	
		Sean Gruber		
			Name of Person	
		S Gruber Agency, LLC		
			Firm/Company	
		5880 NW 104th Lane		
			Address	
		Parkland, FL, 33076		
			City/State and Zip Code	
		Sean@thegruberagency.cor E-mail address: (n to be used for future annual report ποτί	fication)
For furt	ther information	concerning this matter, please ca		
Sean G			305 600-6267	
	Name	of Person	Area Code Daytim	e Telephone Number
Enclose	ed is a check for	the following amount:		
□ \$2:	5.00 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

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

FILED

2021 HOV 15 PH 5: 32

S Gruber Agency, LLC

SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on 11/03/2021 and assigned Florida document number <u>1.21000475593</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The Gruber Agency, LLC The new name must be distinguishable and contain the words "Limited Liability Company... the designation "L.L.C., 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 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: New Registered Office Address: Enter Florida street address ___, Florida ___ City 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 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>	Name	Address	Type of Action
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