121000522057

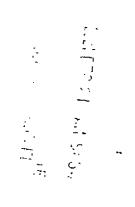
(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	<u> </u>
(Cit	ty/State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300378138693

10 01 01 -01010 - 11 **00.00



A. BUTLER
JAN - 8 2022

COVER LETTER

TO:

TO: Registration Se Division of Cor				
	NEONE, LLC			
SUBJECT:Name of Limited Liability Company				
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Jeffrey Bovarnick, Esq.			
	Name of Person			
	Boyarnick Law			
	Firm/Company			
	150 E. Palmetto Park Road, Suite 350			
		Address		
	Boca Raton, FL 33432			
		City/State and Zip Code		
	jb@bovarnicklawgroup.con	to be used for future annual report notification		
For further information c	oncerning this matter, please c		·41)	
Jeffrey Bovarnick, Esq.		561 465-9969 at ()		
Name o	ſ Person	Area Code Daytime Tele	ephone Number	
Enclosed is a check for th	ne 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 Addres Registration 9		Street Address: Registration Section	١	
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Talla 2415 N. Monroe St		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GROVECONEONE, LLC			11 De 10 m
(Name of the Limited L. (A)	iability Company as it now appears lorida Limited Liability Company)	on our records.)	
	, ,	1	
The Articles of Organization for this Limited Liabil	ity Company were filed on <u>Dec</u>	rember 10, 2021	and assigned
Florida document number 1.21000522057	·		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liability company he	<u>re</u> :	
Groveconone, LLC			
The new name must be distinguishable and contain the words	"Limited Liability Company," the de	signation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable	·:		
(Principal office address MUST BE A STREET A.	DDRESS)		÷
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u></u>		
B. If amending the registered agent and/or regis		ecords, <u>enter the i</u>	name of the new registo
agent and/or the new registered office address he	ere:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flore	ida street address	
	_	, Florid:	
	City	<u></u>	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 a 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being add or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
		 -	□Add
			□ Remove
			□Change
			□Remove
			Change
			□Remove
			□Change
			□Add
		□Remove	
		□Change	
		,	
			Remove

Typed or printed name of signee

Jeffrey Boyarnick, Esq.