## N22000134742

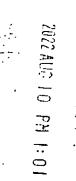
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Office Use Only



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## **COVER LETTER**

TO:	Registration Se Division of Cor			•	•	*
CUDU	Mary's Boy	s, LLC		`		•
SUBJE	C1:	Name of Limi	ited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspo	ndence concerning this matter	to the following:			
		Mary Hodges				
			Name of Person			_
		Mary's Boyz, LLC				
			Firm/Company			_
		8674 Lake George Cir W				
			Address			_
		Macclenny, FL 32063				
			City/State and Zip Code			<del>-</del>
		marysboyz@yahoo.com	to be used for future annual	l		
For furt	ther information c	oncerning this matter, please co		r report nounce	attony	
Mary I		,	904 49	96-2456		
	Name o	f Person	at () Area Code	Daytime T	Felephone Numb	er
Enclose	ed is a check for the	ne following amount:				
<b>≡</b> \$2:	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is co		Certifie	ate of Status &
	Mailing Address Registration			Address: ration Secti	ion	
	Division of C		_	on of Corpo		

P.O. Box 6327

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 AUG 10 PH 1: 01 Mary's Boys, LLC

Mary's Boys, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on March 17, 2022	and assigned
Florida document number L22000134742		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
Mary's Boyz, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
The state of the s		
B. If amending the registered agent and/or registered office	address on our records, <u>enter th</u>	ie name of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
New Registered Office (Reagen).	Enter Florida street address	
	, Flor	rida
<del></del> -	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	1	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F	l I am familiar with and .S. Or, if this document is

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:

<u>or remov</u>	<u>vea trom our recorus</u> :			
MCR =	Manager			

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
		<u></u>	□Change
			□Add
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fective date, if other than the	e date of filing:	(	optional)	
n effective date is listed, the date mu	ast be specific and cannot be prior to date block does not meet the applicable st	of filing or more than 90 days	after filing.) Pun	suant to 605.020
ote: If the date inserted in this ocument's effective date on the I		attitory ming requirements	s, uns date witt	not be fisted a
	ve date, but not an effective time, at	12:01 a.m. on the earlier of	of: (b) The 90	th day after the
record specifies a delayed effecti				·
is filed.				
is filed.				
is filed.  July 27				

Filing Fee: \$25.00