L22000137792

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



600410175126

06/12/23--01013--014 **25.00

1311 ATT ATT 15.57



COVER LETTER

TO:

Registration Section

porations		
nterprises, LLC		
Name of Lim	ited Liability Company	
Amendment and fee(s) are sub	mitted for filing.	
ndence concerning this matter	to the following:	
Larry E. Ryals, II		
	Name of Person	
	Firm/Company	
67 Woodlawn Drive		
	Address	
Palm Coast, FL 32164		
	City/State and Zip Code	
E-mail address: (to be used for future annual report not	ification)
oncerning this matter, please co	all:	
	904 240-5916	
Person	Area Code Daytin	ne Telephone Number
e following amount:		
☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional capy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
section orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations
	Name of Lim Amendment and fee(s) are sub- indence concerning this matter Larry E. Ryals, II 67 Woodlawn Drive Palm Coast, FL 32164 E-mail address: (concerning this matter, please of the concerning this matter) Person c following amount: \$\sum_{20}\$ \$30.00 Filing Fee & Certificate of Status \$\sum_{20}\$ Certificate of Status	Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Larry E. Ryals, II Name of Person

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 JUN 12 AM 7:25

Tally-Ho 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		and assigned
Florida document number 1.22000137792		
This amendment is submitted to amend the following	ŗ.	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	1	
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records, <u>enter</u> <u>e</u> :	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	_	
	Enter Florida street address	
<u> </u>	Flo	orida Zip Code
	City	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 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 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	<u>Address</u>	Type of Action
MGR	Rachel M. Ryals	67 Woodlawn Dr	■Add
		Palm Coast, FL 32164	□Remove
			□Change
			□Add
			☐Remove
			□ Change
			□Add
			☐ ☐ Change
		***************************************	□Add
			□Remove
			□Change
			☐Add
			□Remove
			□Change
			□Add
			¬Remove
			□Change

٠	
Sore:	tive date, if other than the date of filing: [6/1/23]
If the rece record is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the field.
Dated	6/3/ 2023.
	Fre Kull
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signee