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| (Requ                      | uestor's Name)  |            |
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| (City/                     | State/Zip/Phone | <i>#</i> ) |
| PICK-UP                    | ☐ WAIT          | MAIL       |
| (Busi                      | ness Entity Nam | ne)        |
| (Docu                      | ument Number)   |            |
| Certified Copies           | Certificates    | of Status  |
| Special Instructions to Fi | ling Officer:   |            |
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Office Use Only



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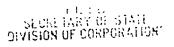
T. MATTHEWS JUL 26 2022

## **COVER LETTER**

|   | Registration Se<br>Division of Cor |  |  |  |
|---|------------------------------------|--|--|--|
| C110 1EC                                      |                                    | Lindley LLC                                  |  |  |
| SUBJEC  | -1;                                | Name of Lim                                  | ited Liability Company   | <del> </del>   |
| The encle                                     | osed Articles of                   | Amendment and fee(s) are sub                 | mitted for filing.   |  |
| Please re                                     | turn all correspo                  | ndence concerning this matter                | to the following:  | ·  |
|   |                                    | Kirsten L Stewart                            |  |  |
|   |                                    |  | Name of Person   |  |
|   |                                    | -  | Firm/Company   |  |
|   |                                    | 3364 McCormick Woods I                       | Drive  |  |
|   |                                    |  | Address  | <del></del>  |
|   |                                    | Ocoee, FL 34761                              |  |  |
|   |                                    |  | City/State and Zip Code  |  |
|   |                                    | kirstenlstewy@gmail.com                      |  | **************************************   |
| For furth                                     | er information c                   | e-mail address: (                            | to be used for future annual report not all:                     | incation)  |
| Kirsten I                                     | L Stewart                          |  | 407 9236217  |  |
|   | Name o                             | f Person                                     |  | ne Telephone Number  |
| Enclosed                                      | l is a check for th                | ne following amount:                         |  |  |
| □ \$25.                                       | 00 Filing Fee                      | ■ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|   | Mailing Addres Registration S      |  | Street Address:<br>Registration Se                               | ection   |
| Registration Section Division of Corporations |                                    | Division of Corporations                     |  |  |
|   | P.O. Box 632                       |  | The Centre of  |  |
|   | Tallahassee, I                     | EL 32314                                     | 2415 N. Monro  | oe Street, Suite 810   |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Stewart & Lindley LLC

22 HAY 23 AH 9: 13

(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 were filed on April 15, 2022 and assigned Florida document number L22000181317 This amendment is submitted to amend the following: 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 "LLC." 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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

. Florida

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> | <u>Name</u>       | Address                               | Type of Action |
|--------------|-------------------|---------------------------------------|----------------|
| AMBR         | Kirsten L Stewart | 3364 McCormick Woods Dr               | <b>≣</b> Add   |
|              |                   | Ocoee FL 34761                        | □Remove        |
|              |                   |                                       |                |
| AMBR         | Michael T Stewart | 3364 McCormick Woods Dr.              | <b>=</b> Add   |
|              |                   | Ococe FL 34761                        | □Remove        |
|              |                   |                                       | Change         |
|              |                   | · · · · · · · · · · · · · · · · · · · | □ Add          |
|              |                   |                                       | □Remove        |
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| -   |   |   | <u>-</u>                                     | -  | ···                                   |
| Effective date, if other that (If an effective date is listed, the date: If the date inserted in document's effective date on | ite must be specific<br>his block does no | and cannot be pric<br>of meet the appli | cable statutory fil                          | (option more than 90 days after ing requirements, this | filing.) Pursuant to 605.0207         |
| he record specifies a delayed e ord is filed.   | fective date, but                         | not an effective                        | time, at 12:01 a.n                           | n. on the earlier of: (b)                              | The 90th day after the                |
| Dated May 5   |   | 2022                                    | <u>.                                    </u> |  |                                       |
| <u> </u>  | Signature o                               | Stewar<br>fa member or aud              | 7  | ve of a member   |                                       |
| ·   | S.S. ataic U                              | . a memor or auti                       | a representati                               | TO OT A INCHINGE                                       |                                       |
| Kirsten L Stewar  |   |   |  |  |                                       |