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SECRETARY OF STATE
TALL AHASSEF, FI

COVER LETTER

TO: Registration Section

Divis	sion of Cor	porations					
	Patriot Pror	no and Print, LLC					
SUBJECT:		Name of Lim	ited 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:				
		John Faulkner					
			Name of Person		_		
		Patriot Promo and Print, L	LC				
		·	Firm/Company	· · ·			
		4058 Kats Ct			S	29	
			Address	 -	TAL	22 00	47.5
		Destin, FL 32541			LWH.	2922 OCT 20 AM 10: 12	Ban Les Jal
			City/State and Zip Code		3887 3087) Æ	
		jfaulkner@goforp3.com			- inoi inoi	<u> </u>	ř.
For further in	formation c	e-mail address: (to be used for future annual report not all:	псацоп)	習	: 12	
John Faulkne	er		919 584-0375 at ()				
	Name o	f Person		e Telephone Numb	ber	-	
Enclosed is a	check for th	ne following amount:					
□ \$25.00 Fi	iling Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee &				tatus &	
Reg Div P.O	ling Addres gistration S ision of C Box 632 lahassee, I	Section orporations 7	Street Address: Registration Se Division of Cor The Centre of To 2415 N. Monro Tallahassee, FI	rporations Fallahassee e Street, Suite	810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Patriot Promo and Print, LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	v appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>L22000187767</u> .	d on April 20, 2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDRESS)	20 7
	200 CR
	N COMME
Enter new mailing address, if applicable:	00 A 10 mm
Mailing address MAY BE A POST OFFICE BOX)	- 5 T
	(T)
3. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	n our records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
New Registered Office Address:	
	inter Florida street address
	, Florida
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>	<u>Name</u>	Address	Type of Action
MGR	Shad R. Pope	1021 Laramie Ct	
		Madison, MS 39110	□Remove
			Change
			□Add
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ffective date, if other than the date of filing an effective date is listed, the date must be specific and lote: If the date inserted in this block does not π ocument's effective date on the Department of S	cannot be price	or to date o	f filing or moutory filing	ore than 90 da g requireme	(option lys after fi nts, this c	ling.) Pur	suant to not be	605.020 listed a
record specifies a delayed effective date, but not is filed.	an effective	time, at 1	2:01 a.m. c	on the earlic	r of: (b)	The 90	th day	after the
, 18 October	2022							
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