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2022 JUN 16 PM 3: 24 SEARL FAR FOR STATE TALLAHASSEE, FL

COVER LETTER

TO: Registration Se Division of Cor			
MARYTHO SUBJECT:	ON SERVICES		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	VINCENT FORD		
		Name of Person	
	MARYTHON SERVICES	3	
		Firm/Company	
	14123 SUMMER BREEZ	E DR E	
		Address	
	JACKSONVILLE FLORI	DA 32218	
		City/State and Zip Code	
	vincent.ford41@hotmail.co	m to be used for future annual report notifi	
Erra Grant on in Communication			canony
	concerning this matter, please e	an:	
VINCENT FORD		904 403-9131 at ()	
Name o	t Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
■ S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration (<u>is:</u> Section	Street Address: Registration Sec	tion
Division of C		Division of Corr	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN 16 PM 3: 24

MARYTHON SERVICES LLC		Street was been said
(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appears on o da Limited Liability Company)	ur record ALL AHASSEE, FL
The Articles of Organization for this Limited Liability	Company were filed on $\frac{05/12/20}{}$	and assigned
Florida document number L22000223827		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	ORESS)	
	 	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:		ls, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida sti	eet address
		Florida 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 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:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	ERICA WILLIAMS	14123 SUMMER BREEZE DR E	= Add
		JACKSONVILLE FLORID 32218	□Remove
			□ Change
			□Remove
			□Change
			□Add
			□Change
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or a Note: If the date inserted in this block does not meet the applicable statutory filidocument's effective date on the Department of State's records.	(optional) more than 90 days after filing.) Pursuant to 605 ng requirements, this date will not be list	:.0207 (3 ed as th
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. ord is filed.	, on the earlier of: (b) The 90th day afte	r the
Dated JUNE 13 2022		
\mathcal{L}		

Filing Fee: \$25.00

Typed or printed name of signee