# L22000230144

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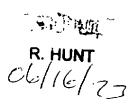
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## **COVER LETTER**

	gistration Sec vision of Corp				
elib ir <i>c</i> yr	Mad Lad, L	.L.C.			
SUBJECT:	-	Name of Limi	ted Liability Company		
The enclose	d Articles of .	Amendment and fee(s) are sub	nitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:		
		Palmer Leary			
			Name of Person		
		Mad Lad, L.L.C.			
			Firm/Company		
		209 W. Alva St.			
		<u> </u>	Address		-
		Tampa, Florida 33603			
		PalmerJ.Leary@gmail.com	City/State and Zip Code		
			to be used for future annual repo	ort notification)	<del></del>
For further	information c	oncerning this matter, please ca	all:		
Palmer Lea	ary		321 230-18 at ()	873	
	Name o	f Person	Area Code	Daytime Telephor	ne Number
Enclosed is	a check for the	ne following amount:			
□ \$25,00	Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$60.00 Filing Fee, Certificate of Status of Certified Copy (additional copy is enclosed

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number  L22000230144  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  Leary LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation that the principal offices address, if applicable:		
The Articles of Organization for this Limited Liability Company were filed on     L22000230144		
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  Leary LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation.  Enter new principal offices address, if applicable:		_
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  Leary LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation.  Enter new principal offices address, if applicable:	assign	ed
A. If amending name, enter the new name of the limited liability company here:  Leary LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation of the new principal offices address, if applicable:		
Leary LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation   Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		
	n "L.L.C	."
(Principal office address MUST BE A STREET ADDRESS)		
	- N-3	=
	<b>6</b> 23	YIS.
Enter new mailing address, if applicable:	ــدِنع _	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	_ <u>~</u> _	
muning duaress (STC) 700 (1. 100 and 1. 100	ج ع	
	<u> </u>	<u> </u>
B. If amending the registered agent and/or registered office address on our records, enter the name of the	. ⊼ : ne <u>w</u> r	<u>egistered</u>
agent and/or the new registered office address here:	0	
Name of New Registered Agent:		
New Registered Office Address:  Enter Florida street address	<del>_</del>	
City Zip C		

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>	<u>Address</u>	Type of Action
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			☐ Change
			□ Add
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Effective date, if other than the date (If an effective date is listed, the date must be Note: If the date inserted in this blood document's effective date on the Dep	ne specific and cannot be prior to deck does not meet the applicable	ate of filing or more than 90 d statutory filing requireme	_ ( <b>optional)</b> ays after filing.) Pursuant to 605.0207 ents, this date will not be listed as
ne record specifies a delayed effective ord is filed.	date, but not an effective time,	at 12:01 a.m. on the earlie	er of: (b) The 90th day after the
Dated November 14th	2023		
	Palmer Le	eary	
S	ignature of a member or authorize	ed representative of a member	,
Palmer Leary			
	Typed or printed na	ame of signee	

Filing Fee: \$25.00