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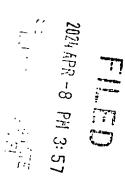
(Requestor's Name)				
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Special Instructions to Filin	g Officer:			
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## **COVER LETTER**

TO: Registration S Division of Co					
F P Vogel					
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	「Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Frank W Vogel				
	***************************************	Name of Person	<del> </del>		
	F P Vogel LLC				
	Firm/Company				
	25450 State Road 64 East				
		Address			
	Myakka City, FL 34251				
	vogel123@aol.com	City/State and Zip Code			
		to be used for future annual report noti	fication)		
For further information of	concerning this matter, please c	all:			
Frank Vogel		941 735-4537 at ( )			
Name o	of Person	Area Code Daytime	e Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address Registration Division of Corp.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F P Vogel LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 2024 APR -8 PH 3: 57 The Articles of Organization for this Limited Liability Company were filed on May 26 2022 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 "L.L.C." 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 \_\_\_. Florida \_\_\_

## 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	F P Vogel Inc	25450 State Road 64 East	<b>≡</b> Add
		Myakka City, FL 34251	Remove
MGR	Frank W Vogel	25450 State Road 64 East	□Add
	Myakka City, FL 34251	■Remove	
			☐ Change
MGR Patricia M Vogel	25450 State Road 64 East	□Add	
	Myakka City, FL 34251	<b>≡</b> Remove	
	<del> </del>	□Change	
<del></del>			□Add
		□Remove	
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		□Remove	
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		□Add	
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		□Change	

D. If amending any other inform				• *
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E. Effective date, if other than t (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not meet the app	olicable statutory filing r	(optional than 90 days after filing equirements, this date	) g.) Pursuant to 605.0207 (3)(be will not be listed as the
If the record specifies a delayed effectecord is filed.	ive date, but not an effectiv	e time, at 12:01 a.m. on	the earlier of: (b) T	he 90th day after the
Dated April 2	2024			
· Trev	M V GA Signature of a member or at	uthorized representative of	a member	····
Frank W Vogel, Regi		-		
	<del>-</del>	inted name of signee		