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## **COVER LETTER**

Division of Corporati	ons		
SUBJECT:	Name of Limited Lie	<u>ket Friends</u> Ll ability Company	<u> </u>
The enclosed Articles of Amen	lment and fee(s) are submitted	for filing.	
Please return all correspondence	concerning this matter to the	following:	
	andrew June	Name of Person	
_		Firm/Company	
	722 n. magnolia	CUL Address	
_	Green (we Spring	SFL, 32043 Vistate and Zip Code CS CS Clor Com sed for future annual report notific	
_	Fhrmachdrewion E-mail address: (to be u	RS CELLOC COM sed for future annual report notific	ration)
For further information concern	ing this matter, please call:		
Ancteu Jones Name of Perso	n	at 904 735-5 Area Code Daytime	IOS Felephone Number
Enclosed is a check for the follows: \$25.00 Filing Fee	-	\$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 Section	on	Street Address: Registration Sect	ion

P.O. Box 6327
Tallahassee, FL 32314

Registration Section

TO:

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

Parket F	riends (LC				
(Name of the Limit	ed Liability Company as it (A Florida Limited Liability	now appears on our re Company)	cords.)		
The Articles of Organization for this Limited Li Florida document number <u>LQLOOQLOG4</u>	iability Company were f	iled on <u>OG/V</u> 3/	192	and assign	ned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	f the limited liability co	mpany here:			
andrew Jones Rea	ltor LC	•			
The new name must be distinguishable and contain the w	ords "Limited Liability Com	pany," the designation "	LLC" or the abbrevi	ation "L.L.C	
Enter new principal offices address, if applic	able:				
(Principal office address MUST BE A STREE	T ADDRESS)		·		
Enter new mailing address, if applicable:			14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2022 AUG	
(Mailing address MAY BE A POST OFFICE	<u></u>			<u></u>	•
B. If amending the registered agent and/or ragent and/or the new registered office addres	-1.	s on our records, <u>er</u>	nter the name of	the new r	egistered
Name of New Registered Agent:	andrew Ju				
New Registered Office Address:	722 n. ma	UNO LO QUE L'Enter Florida street ac	ldress		
	Green Care S	princes	, Florida <u>33(</u> Z	<u>943</u> ip Code	<del></del>

## 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 Degistered 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>Aesident</u>	andrew Zones	722 n. magnolia Que	īMAdd
		722 n. Magnolia ave 32043 Green Cove Springs J.C., 3200	S □Remove
			□Change
			🗖 Add
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ective date, if other than the	e date of filing:		(optional)	
	ust be specific and cannot be prior to	date of filing or more than 90 day	ys after filing.) Pursuant to ts, this date will not be	o 605.020 e listed a
n effective date is listed, the date mu				
n effective date is listed, the date mu te: If the date inserted in this b	Department of State's records.			
n effective date is listed, the date mu te: If the date inserted in this b	Department of State's records.			
n effective date is listed, the date months:  If the date inserted in this becument's effective date on the I  ecord specifies a delayed effecti	Department of State's records.  ive date, but not an effective tim	e, at 12:01 a.m. on the earlier	of: (b) The 90th day	after the
n effective date is listed, the date months:  If the date inserted in this becument's effective date on the I  ecord specifies a delayed effecti		e, at 12:01 a.m. on the earlier	of: (b) The 90th day	after the
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