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(Re	equestor's Name)
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2022 JUL 15 P

COVER LETTER

Registration Section TO: Division of Corporations One Hundred Fold and More LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Bridgette E McLeod Name of Person One Hundred Fold and More Firm/Company 832 Pinewood Street Address Daytona Beach, FL 32117 City/State and Zip Code Onehundredfoldandmore@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bridgette E McLeod Daytime Telephone Number Name of Person Enclosed is a check for the following amount: 55.00 Filing Fee & \$60.00 Filing Fee. □ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy

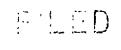
Mailing Address:

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

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2922 JUL 15 PH 5: 05

One Hundred Fold and More LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on July 2, 2022 and assigned
Florida document number L22000298474
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 "LLC."
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

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.

City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Erick Jones	1020 Center Street	
		Holly Hill, Fl. 32117	Remove
			Change
AMBR	Aleasha Jones	1006 Contential Drive	
		Daytona Beach, FL 32117	Remove
			[] Change
AMBR A	Anthony McLeod	832 Pinewood Street	
		Daytona Beach, FL 32117	Remove
			□Change
AMBR	Bridgette McLeod	832 Pinewood Street	□Add
		Daytona Beach, FL 32117	□Remove
			■ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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Effective date, if other than the date of filing:	o 605,0207 (: listed as t
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day rd is filed.	after the
Dated 2022	
Bridgette & McLou Bulgte & Med	