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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO:

Registration Section

Division of Cor	porations	£ .	e e	
	WALL BOYZ LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	DILLON E LAWSON			
		Name of Person		
		Firm/Company		
	4261 SE 62ND ST			
		Address		
	OCALA, FL 34480			
		City/State and Zip Code		
	RUBIS.ROVIRA@WEINS	UREGROUP.COM to be used for future annual report no	titiestica)	
For further information c	oncerning this matter, please c		tineation)	
DILLON LAWSON		352 454-8115		
Name o	f Person	at () Area Code Daytii	ne Telephone Number	
Enclosed is a check for th	ne 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 tadditional copy is enclosed)	
Mallina 643		Course Address		
Mailing Address: Registration Section			Street Address: Registration Section	
Division of Corporations		Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee	
Tallahassee, Fl. 32314		2415 N. Monr	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	nany as it now appears on our records.) Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000325549}{\ell}$.	y were filed on <u>07/22/2022</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility 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		200 SE
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the na	- JU 🍱
agent and/of the new registered office address here.		AUG 31 RETARY LLAHAS
M		31 AFRY 111.25
Name of New Registered Agent:		TARY OF S
New Registered Office Address:		<u> </u>
	Enter Florida street address	SO FL FL
	Florida	
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	DEMETRIUS W SMITH	211 NE 46TH TERRACE GAINESVILLE. FL 3264	l □Add
			■ Remove
			□Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated _____ 2022 Signature of a member or authorized representative of a member DILLON LAWSON Typed or printed name of signee

Filing Fee: \$25.00