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COVER LETTER

TO:	Registration S Division of Co			,
4111111111	BOUK PL	LLC		
SUBJEC	UT:	Name of Lim	ited Liability Company	
The encl	losed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please re	cturn all corresp	ondence concerning this matter	to the following:	
		WINSTON T. BOUK		
			Name of Person	
		BOUK PLLC		
			Firm/Company	
		PO BOX 1601		
			Address	
		GULF BREEZE FL 3250	2	
			City/State and Zip Code	
		RICOATTORNEY@GMA		
			to be used for future annual report not	ification)
For furth	ner information	concerning this matter, please c	all:	
WINST	ON T. BOUK		850 698-5376	
	Name	of Person		ne Telephone Number
Enclosee	I is a check for	the following amount:		
□ \$25.	.00 Filing Fcc	■ \$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 Addre Registration		<u>Street Address:</u> Registration Sc	vetion
		Corporations	Division of Co	
	P.O. Box 63	27	The Centre of	Tallahassee
	Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOUK PLLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	mpany were filed on AUGUST 3, 2022	and assigned
Florida document number L22000343074	-	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	~ 3
ARGUS LAW FIRM PLLC		2023
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or t	he abbreviation J.L.C."
Enter new principal offices address, if applicable:		25
(Principal office address MUST BE A STREET ADDRE	ESS)	· · · · ·
	4	<u> </u>
		到30
Enter new mailing address, if applicable:		· '
(Mailing address MAY BE A POST OFFICE BOX)		·
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter the</u>	name of the new registered
agent and/w the new registered write address here.		
Name of New Registered Agent:		
V P ' 1005 411	·-	· ·
New Registered Office Address:	Enter Florida street address	<u>, , , , , , , , , , , , , , , , , , , </u>
	P12.4	
	, Florida , Ciny	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 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
			□Add
			□ Remove
			□Change
			□Add
			□Remove
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ffective date, if other than the an effective date is listed, the date in some If the date inserted in this ocument's effective date on the	block does not me	et the applicab	date of filing or modele statutory filing	coption (option) (opt	nal) iling.) Pursuant to 605. date will not be liste	.0207 ed as (
record specifies a delayed effect d is filed.	ive date, but not a	n effective time	e, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after	r the
		2023				
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Filing Fee: \$25.00