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(Re	questor's Name)	
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COVER LETTER

Tallahassee, FL 32314

TO:

TO: Registration 8 Division of Co			
MAPLES	MORPHET PHILLIPS PROPE	ERTIES LLC	
SUBJECT:	Name of Lim	ited Liability Company	-
The enclosed Articles o	f Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jason E. Morphet		
		Name of Person	
	MAPLES MORPHET PH	ILLIPS PROPERTIES LLC	
		Firm/Company	
	15421 BELLAMY BROT	HERS BLVD.	
		Address	
	DADE CITY, FL 33523		
		City/State and Zip Code	
	jason@nationsrcm.com		
	E-mail address: (to be used for future annual report no	tification)
For further information	concerning this matter, please concerning	all:	
Jason Morphet		813 701-6122	
Name	of Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for	the 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 Addre		Street Address:	action
Registration Division of 0	Section Corporations	Registration S Division of Co	
P.O. Box 63	•	The Centre of	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAPLES MORPHET PHILLIPS PROPERTIES 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 Comp.	any were filed on ^{09/09/202}	2 and assigned
Florida document number 1.22000395397		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
Gallahue & Morphet Properties LLC		
The new name must be distinguishable and contain the words "Limited L	liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	"	202
	_	AACR CO.
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		SC B
training dataress MAT BE A TOST OFFICE BOAT		<u> </u>
		777 2
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records,	enter the name of the new registered
Name Danistania d OCC and Addison		
New Registered Office Address:	Enter Florida stree	t address
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complacept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ete performance of my du as provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
ırc	Changing Registered Agent, Sign	nature 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>	<u>Address</u>	Type of Action
MGR	Ayleen N. Gallahue	15421 BELLAMY BROTHERS BLVD.	= Add
		DADE CITY, FL 33523	□Remove
			□Change
MGR Christopher D. Maples	15421 BELLAMY BROTHERS BLVD.		
		DADE CITY, FL 33523	■Remove
			□Change
MGR	Paul R. Phillips	15421 BELLAMY BROTHERS BLVD.	□Add
		DADE CITY, FL 33523	■Remove
			□Change
			□Add
			□Remove
			□Change
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<u>Note:</u>	ve date, if other than the date of filing: (optional) ective 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 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
e record rd is fil	d 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
Dated _	January 4 2023
	MAI (II)
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00