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COVER LETTER

TO:

Registration Section Division of Corporations

Beach Town Renovations 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: John Stanbery Name of Person Beach Town Renovations LLC Firm/Company 7285 Mossy Oaks Dr Address Navarre FL 32566 City/State and Zip Code jennystanbery@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 375-3900 John Stanbery Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & **■ \$25.00** Filing Fee Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section **Registration Section Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now ap (A Florida Limited Liability Compa	opears on our records.)
ne Articles of Organization for this Limited is orida document number 122000411189		
is amendment is submitted to amend the fol	lowing:	
If amending name, enter the new name	of the limited liability compan	<u>y here</u> :
new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
iter new principal offices address, if appli	cable:	——————————————————————————————————————
rincipal office address MUST BE A STRE	ET ADDRESS)	
		<u> </u>
		요. 사고 구축 기계
ter new mailing address, if applicable:		<u> </u>
<u>lailing address MAY BE A POST ØFFICE</u>	<u></u>	<u> </u>
ent and/or the new registered office addr	0	ur records, enter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	7285 Mossy Oaks Dr	Florida street address
	Navarre	, Florida 32566

New Registered Agent's Signature, it 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.

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>	<u>Address</u>	Type of Action
AMBR	Jennifer Stanbery	7285 Mossy Oaks Dr	□Add
		Navarre FL 32566	■Remove
			□ Change
			□ Remove
		-	22 hango
			□Add
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	· · · · · · · · · · · · · · · · · · ·	ry as registered agent and as authorized person. John Stanbery to be	
те į	gistered agent and only mem	ber listed on this LLC.	
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f an effec	tive date is listed, the date must	ate of filing: (optional) c specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0	
	the date inserted in this bloom is affective date on the Dep	k does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.	l as t
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e record : rd is filed		date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	he
Se	eptember 27	2022	
Dated		·	
		St	
		enature of a member or authorized representative of a member	
	/ /		

Filing Fee: \$25.00