

122000464399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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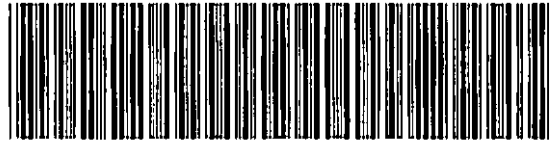
(Business Entity Name)

(Document Number)

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STURGEON GENERAL
FALLS CHURCH, VA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Uncle Tony's Bounce House and More, LLC
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:

Antonio Mcnealy
Name of Person

Uncle Tony's Bounce House and More, LLC
Firm/Company

1735 Granville Ct S
Address

St. Petersburg, FL 33701
City/State and Zip Code

uncletbounceandmore@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Antonio Mcnealy at (727) 418 9287
Name of Person Area Code Daytime Telephone Number

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SECRETARY OF STATE
TALLAHASSEE, FL

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Uncle Tony's Bounce House 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 10/20/22 and assigned Florida document number L22000464399.

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 "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 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

City

Florida

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.

Antonio M. M. M.
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>	<u>Address</u>	<u>Type of Action</u>
MGR	ANTONIO Mcnealy	1735 Granville CT S	<input checked="" type="checkbox"/> Add
		ST. Petersburg, FL 33701	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ANTONIO Mcnealy	1735 Granville CT S	<input checked="" type="checkbox"/> Add
		ST. Petersburg, FL 33701	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BRESHA' TURNER	1735 Granville CT S	<input checked="" type="checkbox"/> Add
		ST. Petersburg, FL 33701	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ANTONIO Mcnealy Jr.	1735 Granville CT S	<input checked="" type="checkbox"/> Add
		ST. Petersburg, FL 33701	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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)

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 11-18, 2022

Antonio N. N. N.
Signature of a member or authorized representative of

Signature of a member or authorized representative of a member

Antonio Mcnealy
Typed or printed name of signee

Typed or printed name of signee

Filing Fee: \$25.00