## L22000494097

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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## **COVER LETTER**

TO: Registration Se Division of Cor		A.	¥	
BEELY LL	C ,			;
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Albert Caproni III			
		Name of Person		
	Cohen & Caproni LLC			
		Firm/Company		
	750 Hammond Drive, Buil	ding 7 Suite 200		202
		Address		
	Atlanta, Georgia 30328			2025 HAY 27
	<del></del> .	City/State and Zip Code	<del>-</del>	71
	acaproni@cohenandcapron			AH 6
	E-mail address: (	to be used for future annual report noti	fication)	6: 53 7: 53
For further information c	oncerning this matter, please c	all:		$10^{\circ}$ $\omega$
Albert Caproni III		404 252-8080 at ( )		
Name o	f Person		e Telephone Number	-
Enclosed is a check for the	he 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 F. Certificate of S Certified Copy tadditional copy is	tatus &
Mailing Address Registration	Section	Street Address: Registration Se		
Division of C	orporations	Division of Cor	porations	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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company has been notified in writing of this change.

(Name of the Lir	nited Linbility Comp (A Florida Limited	any as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Florida document number 1.22000494097	Liability Company	y were filed on Nov	rember 18, 2022 and assigned	
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liab	oility company her	<u>'e</u> :	
Toad Friendly, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the de-	signation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		110 Alabama Avenue		
(Principal office address MUST BE A STRE		House B		
A THE GAL WIFE WALL STREET ADDRESS		Lynn Flaven, Florida 32444		
Enter new mailing address, if applicable:		110 Alabama Ave	enue	
(Mailing address MAY BE A POST OFFICE BOX)		House B		
		Lynn Haven, Florida 32444		
B. If amending the registered agent and/or agent and/or the new registered office addr  Name of New Registered Agent:	registered office : ess here: Kelly M. Neely		cords, enter the name of the new registo	
New Registered Office Address:	110 Alabama Avenuc, House B			
New registered Office Address.		Enter Florid	a street address	
	Lynn Haven		Florida <sup>32444</sup>	
		City	Florida 32444 Zip Code	
New Registered Agent's Signature, if changing				

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

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>	Name	Address	Type of Action
MGR	Kelly M. Neely	110 Alabama Avenue	
		House B	□Remove
		Lynn Haven, Florida 32444	<b>=</b> Change
MGR	Kate McAllister Neely	3008 Rathburn Court	
		Fayetteville, North Carolina 28303	—
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Remove
			Change
			□Remove
			FlChange

	Kelly M. Neely	Typed or printed name		MM 6: 53
Dated	.5/20/25 Signat	ure of a member or authorized re	epresentative of a member	2025 HAY 27 AM 6:
If the recor record is fi	d specifies a delayed effective date. led.	but not an effective time, at	12:01 a.m. on the earlier of: (b)	
ivote:	ive date, if other than the date fective date is listed, the date must be sp. If the date inserted in this block detent's effective date on the Departn	ies not meet the applicable st	of filing or more than 90 days after flatutory filing requirements, this	nal) ling.) Pursuant to 605.0207 (3 date will not be listed as th
	<u> </u>			
				<del></del>

Filing Fee: \$25.00