L220005/6364

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COVER LETTER

·TO:

Registration Section

Tallahassee, FL 32314

Divis	ion of Cor	porations		
	THE SBG I	EDMONDS GROUP LLC		
SUBJECT: _		Name of Limite	d Liability Company	
The enclosed	Articles of	Amendment and fee(s) are subm	itted for filing	
		t		
Please return a	ill correspo:	ndence concerning this matter to	the following:	
		STEPHEN EDMONDS		
			Name of Person	
		THE SBG EDMONDS GRO	OUP LLC	
			Firm/Company	
		2307 CLUBHOUSE DRIVE	Ξ	
			Address	 _
		PLANT CITY, FLORIDA 3	3566	
		•	City/State and Zip Code	
		ONSITEPT@GMAIL.COM		
		E-mail address: (to	be used for future annual report not	ification)
For further inf	ormation co	oncerning this matter, please cal	l :	
STEPHEN EI	DMONDS		757 679-3571	
	Name of	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 Fi		☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$\int \\$ \$60.00 \text{ Filing Fee,} \\ Certificate of Status & \\ Certified Copy \\ (additional copy is enclosed)
Reg	ing Addres	Section	Street Address: Registration Se	
	sion of C Box 632	orporations 7	Division of Col The Centre of 7	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE SECTION ON DISCOUNTED COMMENTS OF THE SECTION O		ande V
(Name of the Limited Liability Comp. (A Florida Limited	Liability Company)	<u>)rus.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000516364</u> .	y were filed on 12/08/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "L	
Enter new principal offices address, if applicable:		240
Principal office address MUST BE A STREET ADDRESS)		CT 7
		ال ال
		Est I o
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, ent	er the name of the new regist
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		. <u></u>
	Enter Florida street ada	ress
		Florida
	City	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 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>	Address	Type of Action
MGR	BETTY EDMONDS	2307 CLUBHOUSE DRIVE	
		PLANT CITY, FL 33566	□Remove
			□Change
			Remove
			□ Remove
			Change
		 -	Remove
			□Change
			Add
			□Remove
		 	Change
			🗀 Ađd
			□Remove
			□Change

					
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				<u> </u>	
n effective date is liste te: If the date inse	ner than the date of fi ed, the date must be specific rted in this block does no date on the Department	and cannot be prior to of meet the applicab	date of filing or more th	(optional) an 90 days after filing.) uirements, this date	Pursuant to 605.0207 will not be listed as
	layed effective date, but		e, at 12:01 a.m. on th	e earlier of: (b) The	90th day after the
		2024			
		2024			
ted OCTOBER 21	of the	2024	zed representative of a	monher	