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(Requestor's Name)
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations					
	& Energy, LLC	Ę.				
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:				
	LISE TRESP					
Name of Person						
STANFIELD & DUPRE, PLLC						
Firm/Company						
1095 EVERGREEN CIRCLE, SUITE 200						
Address						
THE WOODLANDS, TX 77382					2023 Jáil - 4 PH 2+50	
		City/State and Zip Code		LANASSEE HE	1_	
	LISE@STANFIELDDUPR				7	
		to be used for future annual report noti	fication)	<u></u>	<u>.</u>	
For further information c	concerning this matter, please co	all:		163	50	
LISE TRESP		832 482-4622 at ()				
Name o	d Person	at () Area Code Daytim	e l'elephone Number	r		
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)	iling Fee, ate of Stati I Copy Leopy is end	us &		
Marillana A.J.L.		Campar & Johnson				
Mailing Address:Street Address:Registration SectionRegistration Section						
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee				
1.72.1502.00	- <i>(</i>	THE CORRECTED	arianassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ited Liability Compa	any as it now appears on our records. Liability Company)	1		
	(A Fiorida Limited	главину Соправу)			
The Articles of Organization for this Limited F	Liability Company	were filed on December 13, 2022	and assigned		
Florida document number 1.22000522687	·				
Fhis amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name (ndment is submitted to amend the following: ending name, enter the new name of the limited liability company here: une must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" w principal offices address, if applicable: all office address MUST BE A STREET ADDRESS) w mailing address, if applicable: address MAY BE A POST OFFICE BOX) CRESTVIEW, FL 32539 CRESTVIEW, FL 32539 cending the registered agent and/or registered office address on our records, enter the name of the new registered doftice address here:				
The first the fi		, and the second			
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company." the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	r new principal offices address, if applicable: 5585 FLEMING DRIVE				
, ,			CRESTVIEW, FL 32539		
Enter new mailing address, if applicable:		5585 FLEMING DRIVE			
Mailing address MAY BE A POST OFFICE BOX)		CRESTVIEW, FL 32539			
		address on our records, <u>enter t</u>	he name of the new regis		
igent and/or the new registered office addro	ess nere;				
the state of the s			r— . · · · · · · · · · · · · · · · · · ·		
			्रिक्त क्रिक्त स्था जिल्ला		
Name of New Registered Agent:			- S		
	5585 FLEMIN		- 		
Name of New Registered Agent:	5585 FLEMIN CRESTVIEW	G DRIVE Enter Florida street address	25 S		

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 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	RICHARD LONG	5585 FLEMING DRIVE	□Add
		CRESTVIEW, FL 32539	□Remove
			∃ Change
MGR	RHONDA LONG	5585 FLEMING DRIVE	
		CRESTVIEW, FL 32539	□Remove
			■ Change
			□Add
			Remove
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fective date, if other than the d	ate of filing:				(optiona	b	
fective date, if other than the d n effective date is listed, the date must b te: If the date inserted in this bloc	e specific and c	annot be prior to	date of filing c	r more than 90 i	days after tilir	g.) Pursua G. will no	n to 605,0
cument's effective date on the Dep			ne statutory i	ning requirem	ems, ems da	ic will no	toe fisted
ecord specifies a delayed effective is filed.	date, but not a	n effective tim	ie, at 12:01 a.i	n. on the earli	er of: (b)	The 90th c	lay after t
December 29		2022					
ted December 29	·	inhar ar guthar	- /,	1	7		
			11/1/		Call		

Filing Fee: \$25.00

Typed or printed name of signee