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(Re	equestor's Name)	·····
(Ac	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	е)
(D	ocument Number)	·
Certified Copies	Certificates	of Status
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## **COVER LETTER**

TO: Registration Division of C	Section Corporations		
Wolf G	LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Gabriel K Dials		
		Name of Person	<del></del>
	Wolf G LLC		
		Firm/Company	
	3021 49th Terrace South		. :  -1
		Address	
	St. Petersburg, FL 33712		
	12 10 1	City/State and Zip Code	<u> </u>
	wolfygmusic@gmail.com E-mail address: (	to be used for future annual report notificatio	m)
For further information	on concerning this matter, please c	all:	
Gabriel K Dials		727 710-7625	
Nan	ne of Person	at ()	phone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	e ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box 6	on Section f Corporations	Street Address: Registration Section Division of Corpora The Centre of Tallal 2415 N. Monroe Str Tallahassee, FL 323	itions hassee reet, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wolf G LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our record ted Liability Company)	<u>(s.</u> )
The Articles of Organization for this Limited Liability Comp	any were filed on 12/2/12022	and assigned
Florida document number L23000000569		
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 L	iability 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	<u> </u>	~
		- 5
Enter new mailing address, if applicable:		3
(Mailing address MAY BE A POST OFFICE BOX)		
		23
		(S)
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, <u>enter</u>	the name of the new reg
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre:	KS
	F1	orida
	Cits	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 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	Franchon M Dials	3021 49th Terrace South	□Add
		St. Petersburg, FL 33712	<b>≡</b> Remove
			□Change
MGR Gabriel K Dials	Gabriel K Dials	3021 49th Terrace South	<b>≣</b> Add
		St. Petersburg, FL 33712	□Remove
		41-12-9-0-1-1	□ Change
AMBR	Franchon M Dials	3021 49th Terrace South	■Add
		St. Petersburg, FL 33712	ু তুই তুই
			☐ ☐ ☐ ☐ ☐ ☐ Change ☐ ☐ ☐
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ective date, if other than the effective date is listed, the date mute: If the date inserted in this burnent's effective date on the E	st be specific and cannot lock does not meet th	he applicable statu	filing or more than 90 day		
ecord specifies a delayed effective stilled.	ze date, but not an ef	fective time, at 12	:01 a.m. on the earlier	of: (b) The 90t	h day after the
January 5th		23			
	<del></del>				

Typed or printed name of signee