

L 23000007431
 Florida Department of State
 Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : SODL & INGRAM PLLC
Account Number : I20190000071
Phone : (904)257-5777
Fax Number : (904)347-2738

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GRAMBO'S MANAGER LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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

GRAMBO'S MANAGER 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 01/06/2023 and assigned
 Florida document number L23000007431

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:

50 SILVER FOREST DR #203

(Principal office address MUST BE A STREET ADDRESS)

ST. AUGUSTINE, FL 32092

Enter new mailing address, if applicable:

50 SILVER FOREST DR #203

(Mailing address MAY BE A POST OFFICE BOX)

ST. AUGUSTINE, FL 32092

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:

SODL & INGRAM PLLC

New Registered Office Address:

1617 SAN MARCO BLVD

Enter Florida street address

JACKSONVILLE


, Florida 32207

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.


William Gibbs (Form # 2022.15.1-1.037)

If Changing Registered Agent, Signature of New Registered Agent
 William Gibbs, Authorized Person

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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>
<u>MGR</u>	<u>GRAHAM, FRANK</u>	<u>50 SILVER FOREST DR #203</u>	<input type="checkbox"/> Add
		<u>ST. AUGUSTINE, FLORIDA 32092</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 December 4, 2023

FILED (DEC 4, 2023 11:05 EST)

Signature of a member or authorized representative of a member

Frank Graham, Authorized Representative

Typed or printed name of signee

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Filing Fee: \$25.00