(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
cd Copies Certificates of Status		
coral Instructions to Filing Officer		
Free amendment due to error.		
due to error.		
5-C·		
Office Use Only		



COVER LETTER

(): Registration Se Division of Cor			
вјест:	amp and Name of Lim	Grind Lindility Company	<u>-ogisti</u> cs
e enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
ase return all correspo	ondence concerning this matter	to the following:	
	Purnel	Name of Person	5
		and Grins	
	3452 Be	Ifort Road	
Juckson: 1/e Florida 32216			
Juckson: 1/e Flosida 32216 City/State and Zip Code Purnelly as ris 123 O icloud, com E-mail address: (to be used for future annual report notification)			
further information e	oncerning this matter, please co	all:	
Purnell Name o	Harri's	at (<u>GOU</u>) LITZ Area Code Daytim	2 - 0672 e Telephone Number
closed is a check for the	ne 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 Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Sec	ction
Division of C P.O. Box 632		Division of Cor The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stump t Grind Name of the Limited Liability Co (A Florida Line	umpany as it now appears on our records.) ited Liability Company)
. Articles of Organization for this Limited Liability Composida document number <u>L. 23.00009</u>	pany were filed on $\frac{1}{2}$ and assigned
is amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited	liability company here:
new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
ater new principal offices address, if applicable:	23
Principal office address MUST BE A STREET ADDRES.	<u>S</u>
ater new mailing address, if applicable: (Lailing address MAY BE A POST OFFICE BOX)	19 PH 25
. If amending the registered agent and/or registered of cnt and/or the new registered office address here:	fice address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	rnell Hurris
New Registered Office Address: 345	2 Belfort Koud Enter Florida street address
Juc	Lycnville Florida 32216 City Zip Code

- w Registered Agent's Signature, if changing Registered Agent:

ereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is vig filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability apany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Homending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added a removed from our records:

.GR = Manager xMBR = Authorized Member

. <u>.tle</u>	<u>Name</u>	Address	Type of Action
MER	Purnell Hair's	3452 Belfort Roc	id Endd
		Jacksonville, Fl. 32216	□Remove
			□Add
			Remove
			O S S S S S S S S S S S S S S S S S S S
			— □-Add
			ERemoye ✓ S-
			□ Change
			DAdd
			⊡Remove
			□Change
			DAdd
			□Remove □Change
			Denange
			□Remove
			—— □Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
The names Hirst and last were
listed in reverse causing a problem
11 1 1 1
with my bank, lity first name
15 rurnelly last name Hastis.
I need it changed to such
under authorized persons detail
DIVIS 23 J
AA 1000
Complete data if atheres there there they do not filled.
Effective date, if other than the date of filing: fan 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)(h) 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.
c 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
id is filed January, 19,2023
Dated 1/19/23
6 junel S. Amis
Signature of a member of authorized representative of a member
Purnell L. Harris
Typed or printed name of signee

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