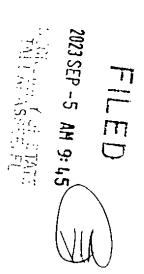
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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of S	Status
Special Instructions to	Filing Officer:	

Office Use Only



05/15/23--01023--004 **25.00



COVER LETTER

TO: Registration Se Division of Cor					
arin incup	Bichét Pér	227100			
SUBJECT:	1	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:			
	4	SAMUEL BROWLET			
	Lieu	Firm/Company			
		Firm/Company			
	3741	Achor Ride & RD			
		Address			
	Milh.	N FL 35571			
	1.4,010	City/State and Zip Code			
	hicust Récilois	City/State and Zip Code City/State and Zip Code City/State and Zip Code To be used for future annual report notice	1		
	E-mail address: (to be used for future annual report noti	ification)		
	oncerning this matter, please c				
SAM	· Bruit	at (850) 776	6241		
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed 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)		
Mailing Address Registration 9		<u>Street Address:</u> Registration Se	ection		
Division of C	Corporations	Division of Con	Division of Corporations		
P.O. Box 632 Tallahassee, l		The Centre of T	Fallahassee be Street, Suite 810		
1 anana5500, i	L L フムフ Lマ	ATIJ IN. PIONIO	NO DITTOUR DUITE UTV		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gillet PECROLING L	-16				
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our recor d Liability Company)	<u>ds.</u>)			
The Articles of Organization for this Limited Liability Compar Florida document number LJ3 00006451	and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	ability company here:				
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LL	C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)		2023			
		3 SEP			
Enter new mailing address, if applicable:		у уч			
(Mailing address MAY BE A POST OFFICE BOX)		2/17 A			
					
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>ente</u>	gri] - O			
Name of New Registered Agent:					
New Registered Office Address:					
New Registered Office Address.	Enter Florida street address				
	, Florida				
	City	Zip Code			
New Registered Agent's Signature, if changing Registered Agen					
I hereby accept the appointment as registered agent and ay provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered office company has been notified in writing of this change.	te performance of my duties, a s provided for in Chapter 605,	ind I am familiar with and , F.S. Or, if this document is			

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

Title	Name	Address	Type of Action
MCP	tAFA SMITH	<u> </u>	
		3711 Affect Rids	ERDM. Har FL 32571
		.	□ Change
			Remove
			Change
			□Add
			□Remove
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			□Add
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			Change
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			□Change

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			<u>-</u>				
an effective <u>fote:</u> If th	ate, if other than e date is listed, the date e date inserted in thi effective date on th	must be specific an is block does not	d cannot be prior meet the applica	to date of filing or me able statutory filing	(opti ore than 90 days after requirements, thi	onal) r filing.) Pursuant to 605 s date will not be liste	i.0207 ed as t
record spo I is filed.	reifies a delayed effe	ective date, but no	et an effective ti	me, at 12:01 a.m. c	on the earlier of: (1) The 90th day after	r the
ated	8/12/2	3	· ——				
	•		7				
			0 /				
		Signature of a	member or author	orized representative	of a member		

Filing Fee: \$25.00