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			,		
SUBJECT.	BLAGROVE	& ASSOCIATES LLC	,		
SUBJECT:	Name of Limited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
	LOVETTE DOBSON				
		Name of Person			
	Name of Limite Proclosed Articles of Amendment and fec(s) are submetered and correspondence concerning this matter to LOVETTE DOBSON 17350 STATE HWY 249 ST HOUSTON TX, 77064 EFILE1234@INCFILE.COM F-mail address: (to arther information concerning this matter, please call EFITE DOBSON Name of Person Seed is a check for the following amount:	Firm/Company			
		STE 220			
		Address			
	HOUSTON TX, 77064				
	CERTIFICATION CERTIFICA	City/State and Zip Code	 		
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For further information	concerning this matter, please of	all:			
LOVETTE DOBSON			8-462-3453		
Name	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sol.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
		<u>Street Address:</u> Registration Se	ction		
Division of	Corporations	Division of Cor	porations		
		The Centre of T			
i aliahassee,	.FL 32314	Z415 N. Monro	e Street, Suite 810		

Tallahassee, FL 32303

(((H230000661553)))

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

BLAGROVE & ASSOCIATES LLC		
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	ars on our records.)	'
The Articles of Organization for this Limited Liability Company were filed on _	01/09/2023	_ and assigned
Florida document numberL23000016371		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company h	nere:	
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abbr	eviation "L.L.C "
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADDRESS)		20
	· ·	123
	•	် က် -
Enter new mailing address, if applicable:		21
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or registered office address on our	records, enter the name	√ Nof the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	orida strevi address	
izmer ru	riuu sireet aaaress	
Cur	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		Διρ Coae

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 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: (((H23000066155 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	SEFORA BLAGROVE	4813 POLO CT	
		ORLANDO , FL 32818	■Remove
			□Change
AMBR	SOMARAH BLAGROVE	4813 POLO CT	🗆 Add
		ORLANDO , FL 32818	≣Remove
AMBR	SHERESE BLAGROVE	4813 POLO CT	⊡Add
		ORLANDO . FL 32818	≡ Remove
			☐Change
			FlAdd
			□Remove
			Change
			□Add
			□Remove
			Change
			🗀 Add
			□Remove
			□Change

D. If amending any other informa	tion, enter change(s) here:	: (Attach additional sh	vets, if necessary.)	
		<u></u>		
				
			<u> </u>	<u> </u>
				
<u>-</u>				
Effective date, if other than the (If an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the De	the specific and cannot be prior to ock does not meet the applical	o date of filing or more than ble statutory filing requir	(optional) 90 days after filing.) Pursuant to ements, this date will not be	605.0207 (3)(listed as the
the record specifies a delayed effective cord is filed.	e date, but not an effective tim	ie, at 12:01 a.m. on the e	arlier of: (b) The 90th day a	ifter the
Dated February 20th	. 2023	- ·		
	O'mar Blages Signature of a wember or aughori	ebe	nber	
	ン Omar Bla			
	Typed or printed			