## L23000046925

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LIGNIC & Amend



A. RAMSEY APR 1 9 2023

## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	porations				
		Group, ELC		•		
SUBJECT:	Name of Limited Liability Company					
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Scott David Barrish				
	The Barrish Group, LLC					
	Firm/Company					
	115 NE 8th Ave.					
Address						
		Ocala, FL 34470				
			City/State and Zip Code			
		scott@thebarrishgroup.com	to be used for future annual report no	ntitication)		
For further in	iformation c	oncerning this matter, please e	·			
Scott David Barrish		352 290-7400 at ()				
	Name o	f Person	Area Code Dayti	me Telephone Number		
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	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)		
	iling Addres		Street Address:			
Registration Section			Registration Section Division of Corporations			
Division of Corporations P.O. Box 6327			The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TILED

2823 FEB 16 PM 12 31

The Barrish Group, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

TAILLAHASSEELFLORID!

The Articles of Organization for this Limited Liability	Company were filed on JANUAI	RY 25, 2023	and assigned
Florida document number L23000046925			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company here:		
Scott David Barrish, LLC			
The new name must be distinguishable and contain the words "L	imited Liability Company," the designat	tion "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register	rad office address on our resoud	a antar tha name	o of the nav region
s. If amending the registered agent and/or register agent and/or the new registered office address here		s, <u>citter tije nam</u>	e of the new regis
Name of New Registered Agent:			
New Registered Office Address:			
The registered of the radicise.	Enter Florida str	eet address	
		, Florida	
	Ciţ	<u> </u>	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
AMBR	DANA BARRISH	115 NE 8th Ave.	□Add
		Ocala, FL 34470	■Remove
MGR	SCOTT DAVID BARRISH	115 NE 8th Ave.	□Add
		Ocala, FL 34470	□Remove
			€ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
		·	□Change
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		<del></del>	□Remove
		<u></u>	□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) \_ (optional) 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 \_\_ 2023 Scott D. Barriet Signature of a member or authorized representative of a member SCOTT DAVID BARRISH Typed or printed name of signce

Filing Fee: \$25.00