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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Above & Beyon	ne of Limited Liability Company	rance LLC
The enclosed Articles of Amendment and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Steve	Name of Person	
	Firm/Company	
717 M	III TRAIL C+	
Pante Ve	dra Beach Fl City/State and Zip Code	32082
	ddress: (the be used for future annual report notifi	L.COM SE HAR TO
For further information concerning this matter, p	please call:	2 - Z
_ Steven Barry	<u> </u>	ويستينه المحارب المحارب
Name of Person		Telephone Number 1757 R. S.
Enclosed is a check for the following amount:		
□ \$30.00 Filing Fee Certificate of St	e & S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

The second second

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 12023 and assigned Florida document number <u>L23000664410</u> 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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.

City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Steven Barry	717 HILLTRAIL Ct.	XXAdd
		Ponte Vedra Beach 18132	<u>PO\$Z</u> □Remove
			□ Change
Αρ	Tara Barry	717 Mill Trail Ct	□ Add
		Ponte Vedra Beach, F13	2082 Remove
			<u>F</u> O∰d
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					l a.m. on the	earlier of: (b)	The 90th day	after the
Feb.	26		. 202	<u>.3</u> .			E F	2025
	_)(Signature of a	BUA memmer or ac	ithorized represe	entative of a m	ember	T. C.	5
		500 T	7,500				()	
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Filing Fee: \$25.00