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R. HUNT 03/25/23

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: ShITH & SONS ROLLING GAILERY LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
THOMAS D Smith
Name of Person
Firm/Company . Te
9717 VIIIERS DR South
Firm/Company 9717 VIIIES De South Address Address Address Object and To Order
City/State and Zip Code
For further information concerning this matter, please call:
Thorn AS D. Smith at (904) (651-770) Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{\$30.00 Filing Fee & S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\times \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{\$10.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\$10.00 Filing Fee, Certified Copy (additional copy is enclos
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP:O:Box 6327The Centre of TallahasseeTallahassee FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

SMITH & SONS ROLLING GALLEY LLC

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

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company v	vere filed on 3/10/2023 and assigned
Florida document number <u>L_23000126559</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil SMITH & SONS ROLLING G	•
The new name must be distinguishable and contain the words "Limited Liabilit	
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 ac agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
The state of the s	

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>	<u>Address</u>	Type of Action
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			□ Remove
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e: If the date inserted in this block does not meet the applicable statutory filing rument's effective date on the Department of State's records.	requirements, this date will not be listed
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after th
s filed.	
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Signature of a member or authorized representative of	a member