## 23000162962

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
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(Di	ocument Number)
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## **COVER LETTER**

Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

TO:

OPERATIVE INVESTIGATIONS GROUP, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and feets) are submitted for filing. Please return all correspondence concerning this matter to the following: John H. Stone Sr. Name of Person OPERATIVE INVESTIGATIONS GROUP, LLC Firm/Company 600 Scotia Dr. APT 101 Address Hypoluxo FL 33462 City/State and Zip Code operative.investigations.group@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John H. Stone Sr 584-0354 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & **\$60.00** Filing Fee, ☐ \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Operative Investigations Group, LLC		
( <u>Name of the Limited Liability Company</u> : (A Florida Limited Liab	is it now appears on our records.) ility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L23000162962</u>	re filed on March 31, 2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	<u>v company here</u> :	
The new name must be distinguishable and contain the words "Limited Liability (	Company," the designation "LLC" or the abbrev	iations L.C.
Enter new principal offices address, if applicable:	<del></del>	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		1
_		<del></del>
		- 3
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		<i>ن</i> ر
	•	
B. If amending the registered agent and/or registered office addagent and/or the new registered office address here:	ress on our records, <u>enter the name of</u>	the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florido street address	
	. Florida	
	City	Lip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as pro	formance of my duties, and I am fam	lliar with and

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	John H. Stone Sr	600 Scotia Dr	■Add
		APT 101	□Remove
		Hypoluxo, FL 33462	Change
			□Add
			Петюvе
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

Note: Two Changes		
1) Update Email to:		
operative, investigations, g	oup@gmail.com	
2) Add Authorized Persor	: (MGR)	
John H. Stone Sr		
600 Scotia Dr		25
Apt 101		2923
Hypoluxo, FL 33462		1
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e: If the date inserted in this	April 01, 2023  nust be specific and cannot be prior to date of filing or moblock does not meet the applicable statutory filing Department of State's records.	(optional) ore than 90 days after filing.) Pursuant to 605.0 g requirements, this date will not be listed
ord specifies a delayed effectived.	tive date, but not an effective time, at 12:01 a.m. c	on the earlier of: (b) The 90th day after
ed 22 May	2023	

Filing Fee: \$25.00