123000196305

(Requestor's Name)
(Address)
, ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
openial management to 1 ming officer.





200407382942

04/25/23--01024-01025 APR 25 AMII: 05
05/25/23--01024-01025 AMII: 05
05/25/23--01024-01025 AMII: 05

A. RIVERS JUN 1 0 2023

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Samuel BarberTII 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:
Samuel Barber III Name of Person
Samuel Barber III, LLC Firm/Company
3564 Avalon Park E Blvd Stel
Orlando, F1 32828 City/State and Zip Code Samuelbabarber @gmail. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Samuel Barber III at (561) 350 - 5049 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Solon Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{Solon Filing Fee}\$\$ Certified Copy (additional copy is enclosed)

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 ARTICLES OF ORGANIZATION

(Name of the Limited Linbility	y Company as it now appears on our recor Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Co Florida document number <u>L_23000/9630</u>	ompany were filed on 4/20/	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	······
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2023 APR 2 SECRETA
B. If amending the registered agent and/or registered	office address on our records, ente	750 OT 100 PM 3 C
agent and/or the new registered office address here:		क्षेत्र छ
Name of New Registered Agent:		*****
New Registered Office Address:	Enter Florida street addr	ess
	, F	Florida
	City	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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			☐ Change

	-		nation, enter c					
_	Any	Other	Provis	10 M (5)		ANY	AND	ALL
	LAWA	FUL	BUSIA	VE 55				
_								
_				. •				
-								
_				<u>.</u>				
_								
_								
_								
			-					
-								· · · · · · · · · · · · · · · · · · ·
_							·	
_								
_							<u></u>	
_								
- ffecti	ve date i	if other than t	he date of filin	σ•			(opt	ional)
f an effe Note:	ective date i If the date	is listed, the date re inserted in this	nust be specific and	d cannot be prior to meet the applical	date of f	iling or more t	han 90 days afte	r filing.) Pursuant to 605.0207 is date will not be listed as
record d is file		a delayed effec	tive date, but not	an effective tim	ie, at 12:	01 a.m. on t	ne earlier of: (b) The 90th day after the
Dated ₋	April	1 215+		2023	_ ·			
			1.	-111				
		-	Signature of a	member or author	ized repre	sentative of a	member	
		~	vel Bai	d., –	///			
		Jam	ひとし りんし	1 10 7 7	111			