L23000347757

(Requestor's Name)					
(Address)					
(Address)					
(7.001033)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
. <u> </u>					

Office Use Only



900413201869

08/01/23--01036--016 **30.00

FILED
2023 AUG -1 PM 6: 19
SEGNETARY OF STATE



COVER LETTER

	Registration Section Division of Corporations						
SHD IECT		ENTERPRISES LLC					
SUBJECT: Name of Limited Liability Company							
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please retu	irn all correspo	ondence concerning this matter	to the following:				
		Stephen R Fiore					
Name of Person							
L&GREY ENTERPRISES LLC							
Firm/Company							
3990 Broneo Road							
			Address				
		Middleburg, FL 32068					
			City/State and Zip Code				
	Lgrey.enterprises@gmail.com						
			to be used for future annual report n	otrication)			
For further	r information c	oncerning this matter, please c	all:				
Stephen R Fiore Name of Person		954 647-0616					
		at () Area Code Days	time Telephone Number				
Enclosed i	s a check for the	ne following amount:					
□ \$25.00	0 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)			
	Aailing Addres		Street Address: Registration 9				
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

	, F	lorida Zip Code	
	Enter Florida street address		
New Registered Office Address:		***	
Name of New Registered Agent:		 	
gent and/or the new registered office address here:			
. If amending the registered agent and/or registered	d office address on our records, <u>ente</u>	r the name of the new register	
		77 -	
Mauing dauress MAT BE A POST OFFICE BOA		my d	
Mailing address MAY BE A POST OF FICE BOX		m SSS	
inter new mailing address, if applicable:			
		2023 AUG	
Principal office address MUST BE A STREET ADDR	<u>(ESS)</u>	20 2	
nter new principal offices address, if applicable:		1,	
•	, , , ,		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "EL	C" or the abbreviation "L.L.C."	
If amending name, enter the new name of the limi	ited liability company here:		
this amendment is submitted to amend the following:			
	_ ;		
lorida document number 1.23000347757			
he Articles of Organization for this Limited Liability C	ompany were filed on July 24,2023	and assigned	
(A Florida	y Company as it now appears on our recor Limited Liability Company)	 ,	
L&GREY ENTERTRISES LLC (Name of the Limited Liabilit	ty Company as it now appears on our recor	rds.)	

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
MGR	Bethany J Fiore	3990 Bronco Road	
		Middleburg, F1, 32068	≡ Remove
		*	□ Change
MGR	Stephen R Fiore	3990 Bronco Road	= Add
		Middleburg, FL 32068	□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			Remove
			□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 _ July 29 Signature of a member or authorized representative of a member Stephen R Fiore Typed or printed name of signee