L23000387385

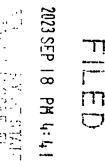
(Request	or's Name)
(Address)
(Address)
(City/Stat	e/Zip/Phone #)
DICK-UP] WAIT MAIL
(Busines:	s Entity Name)
(Docume	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:





200415885992

09/18/23--01026--002 **25.00





COVER LETTER

TO:

TO: Registration S Division of Co			
First Coas SUBJECT:	t Photo LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Daniel Martin		
		Name of Person	
	First Coast Photo LLC		
		Firm/Company	
	89 Oak Knoll Court		
		Address	
	St Augustine, FL. 32092		
	daniel.l.martin@protonmail	City/State and Zip Code	
	•	to be used for future annual report notifica	tion)
For further information	concerning this matter, please ca	all:	
Daniel Martin		267 253-4997 at ()	
Name	of Person		elephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corpo The Centre of Tall 2415 N. Monroe S Tallahassee, FL 32	rations Iahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

First Coast Photo LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file	ed on August 17, 2023 and assigned
Florida document number 1.23000387385	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
	·····
he new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	W
Principal office address MUST BE A STREET ADDRESS)	2023 SI TI
	S S TI
	<u> </u>
	%
Enter new mailing address, if applicable:	3 7
Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
3. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, <u>enter the name of the new regis</u>
gent and/of the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	. Florida

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

Zip Code

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
AP	Daniel I Martin	89 Oak Knoll Ct	□Add
		St Augustine, FL. 32092	■Remove
			Change
AMBR	Daniel L Martin	89 Oak Knoll Ct	⊒ Add
		St Augustine, FL. 32092	□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			
			□Remove
			□Change
			
			□Remove
			□Change

 -					
					
			·		·
	<u></u>				
					· -
					
					
		· · · · · ·			
	her than the date	of filing:		(options	al)
Effective date, if o	ted, the date must be spe	ecific and cannot be pr	rior to date of filing or mo	ore than 90 days after fili	ing.) Pursuant to 605,0207
If an effective date is lis	crited in una block do			requirements, this do	ate will not be fisted as
If an effective date is lis Note: If the date ins	date on the Departm				
Effective date, if or If an effective date is lis Note: If the date ins document's effective	date on the Departm				
If an effective date is lis Note: If the date ins document's effective e record specifies a d	·		e time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
If an effective date is lis Note: If the date ins document's effective e record specifies a d	·		e time, at 12;01 a.m. o	on the earlier of: (b)	The 90th day after the
If an effective date is lis Note: If the date ins document's effective e record specifies a dard is filed.	elayed effective date,		e time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
If an effective date is lis Note: If the date ins document's effective e record specifies a d	elayed effective date,	, but not an effective	e time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
If an effective date is lis Note: If the date ins document's effective e record specifies a drd is filed. September 14	elayed effective date,	, but not an effective	·		The 90th day after the
If an effective date is lis Note: If the date ins document's effective e record specifies a dard is filed.	elayed effective date,	, but not an effective	e time, at 12:01 a.m. o		The 90th day after the