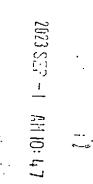
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Special Instructions to Filing Officer.



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COVER LETTER

FO: Registration S Division of Co			•
REELWR SUBJECT:	юнт птс		
	Name of Lir	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing	
Please return all corresp	ondence concerning this matter	to the following:	
	KEVIN LAWRENCE		
		Name of Person	
		Firm/Company	
	21728 FRIEEMAN DRIVI	3	
		Address	
	UMATILLA.FLORIDA 3	2784	
	REELPICKUP@GMAIL.C	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
or further information of	concerning this matter, please c	all:	
KEVIN LAWRENCE		304 995-5807 at ()	
Name o	of Person		e Telephone Number
Inclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 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)

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 TO ARTICLES OF ORGANIZATION OF

2023 SEP - 1 AH 10: 47

REELWRIGHT LLC

(A Florida Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/24/2023 and assigned Florida document number 1.23000399644

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

	City	Zip Code
	,	Florida
New Registered Office Address:	Enter Florida street add	ress
Name Danistana d Office - A de-		
Name of New Registered Agent:		

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	KEVIN LAWRENCE	21728 FREEMAN DRIVE UMTILLA FL 32784	(a) Add
			□Remove
			□Change
			□Remove
			□Change
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· · · · · · · · · · · · · · · · · · ·			🗆 Add
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			Remove
			□Change

Effective date, if other than the date of filing: #28/2023 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 665.0. **Mote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. 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 toord is filed. Dated **B28/2023** Dated **B28/2023** **Date: If the specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after toord is filed.	
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	Dated 8/28/2023
Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member

Filing Fee: \$25.00