11/28/23, 10:38 AM

Division of Corporations

Florida Department of State

Division of Corporations

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(((H23000406258 3)))



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ann	ual report maili	ngs. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LRS FAMILY HOLDINGS, LLC

Certificate of Status	0
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1.0. 2020

ARTICLES OF AMENDMENT **ARTICLES OF ORGANIZATION** OF

	MILY HOLDINGS, LLC.						
(Name of the Li	mited Liability Company as it now ap (A Florida Linused Liability Compa	ny)					
The Articles of Organization for this Limited	Liability Company were filed on	November 27, 2023 and assigned					
Florida document number L23000454846							
This amendment is submitted to amend the following:							
A. If amending name, enter the new name	of the limited liability company	v here:					
The new name must be distinguishable and contain the	e words "Limited Liability Company," t	he designation "LLC" or the abbreviation "L.L.C."					
Enter new principal offices address, if app	licable:						
(Principal office address MUST BE A STRI	EET ADDRESS)						
		Ç					
P-4							
Enter new mailing address, if applicable:							
Mailing address MAY BE A POST OF FIC	<u></u>						
3. If amending the registered agent and/or	repistered office address on our	records, enter the name of the new register					
gent and/or the new registered office addr	cas pere:	records, enter the name of the new register					
Name of New Registered Agent:	Lisa Rence Stamm						
New Registered Office Address:	16213 Aberdeen Avenue						
	Enter F	lorido street address					
	Naples	Florida 34110					
	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 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

Tirle	<u>Name</u>	Address	Type of Action
AMBR	Lisa Rence Stamm	16213 Aberdeen Ave	
		Naples FL 34110	
			■ Change
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Note: If the date ins	ther than the date of filing:	07 (3ჯ ¤8 the
record energia.	clayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	