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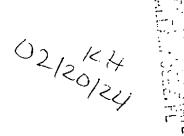
(Requestor's Name)
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## **COVER LETTER**

		stration Sect ion of Corpo					
SUBJECT	Pomeroy Industries, LLC  CT:  Name of Limited Liability Company						<b>~</b> 4.
SUBJEC							
The enclo	osed .	Articles of Ar	mendment and fee(s) are sub	omitted for filing.			
Please ret	lurn a	all correspond	lence concerning this matter	to the following:			
			Shaun Hubbard				
				Name of Person			
			Pomeroy Industries, LLC				
				Firm/Company			
			1573 Resolute St				
				Address			
			Celebration, Fl. 34747				
				City/State and Zip Code			
			shaunhubbard2013@icloud			(C = 1	
For furtlæ	er infe	ormation con	rman address: ( cerning this matter, please ca	to be used for future annual report notificat all:	ion)	27, FEB	****
Shaun Hi	ubba	rd		904 4017308 at ( )		0	
Fuel- and	•	Name of P			lephone Number	H 9:50	
			following amount:	_	_		
■ \$25,0	00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POMEROY INDUSTRIES LLC	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.)
The Articles of Organization for this Limited Liability Company were filed on	10/12/2023 and assigned
Florida document number 1.23000470422	
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," th	e designation "LLC" or the abbreviation "L.L.C."
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)	E3
	H
	1
B. If amending the registered agent and/or registered office address on our	
agent and/or the new registered office address here:	
	115 <b>√</b>
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
Enter F	lorida street address

## 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.

Cuv

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
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		Celebration, FL 34747	<b>∃</b> Remove
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record specifies a delayed effective d is filed.	date, but not an effec	rtive time, at 12;t	01 a.m. on the earli	er of: (b) The	90th day after the
January 31	2024	·			
)ated					
Shaun Hubbard					
Shaun Hubbard	gnature of a member of	r authorized repre-	sentative of a membe	т	