L23000477154

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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special instructions to rising Offices.





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COVER LETTER

Registration Section

TO:

Division of Ço	rporations		
Cameron F	Bryson IRA, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
	Amendment and fee(s) are subondence concerning this matter	U	
·			
	Michelle A. Berglund-Har	rper, Esq.	
		Name of Person	
	Murphy & Berglund, PLL	С	
		Firm/Company	
	1101 Douglas Ave Suite 1	006	
		Address	SECRETALE ASS
	Altamonte Springs, FL 32		
	michelle@murphyberglund	City/State and Zip Code	
	=	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	2:
Michelle A. Berglund-H	arper, Esq.	407 865-9553	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Cameron Bryson IRA, LLC		
(<u>Name of the Limited Liability Con</u> (A Florida Limite	npany as it now appears on our re ad Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Compa Florida document number $\frac{L23000477154}{L}$	ny were filed on $\frac{10/17/2023}{10/17/2023}$	and assigned
riorida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li-	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	 	
		202 Se
Enter new mailing address, if applicable:	,	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>en</u>	ter the name of the new register
agent and/of the new registered office address here:		23
Name of New Registered Agent:		(1)
New Registered Office Address:	Enter Florida street ad	litrass
	City	. Florida
New Registered Agent's Signature, if changing Registered Agen		Σιρ Coae
hereby accept the appointment as registered agent and as	_	

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

<u>Title</u>	Name	Address	Type of Action
MGR	Cameron Bryson	1531 Saint Edmunds Pl., Lake Mary, FL 32746	□Add
			Remove
			□Change
MGR	Mark Bryson	1531 Saint Edmunds Pl., Lake Mary, FL 32746	\equiv Add
			□Remove
			Change DAdd
			□Chànge
			□Add
			□Remove
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fective date, if other than the an effective date is listed, the date mutote: If the date inserted in this becument's effective date on the D	st be specific and cannot be prior lock does not meet the applic department of State's records	able statutory filing rec	quirements, this date v	will not be listed a
record specifies a delayed effective is filed.	e date, but not an effective ti	me, at 12:01 a.m. on th	e earlier of: (b) The	: 90th day after the
oted October 25	. 2023	·		
		orized representative of a		

Filing Fee: \$25.00