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SECRETARY OF STATE FALLAHASSEE FLORIDA



COVER LETTER

TO:		ition Secti of Corpo				e
CHIDIF		South Iron	n, LLC			
SUBJE	C1;		Name of Limi	ited Liability Company	.	
The enc	losed Arti	cles of An	nendment and fee(s) are sub	mitted for filing.		
Please r	eturn all c	orrespond	ence concerning this matter	to the following:		
Division SUBJECT: The enclosed Please return For further intermediately Kaatjeluke W			Kaatjeluke Wells			
				Name of Person		· · · · · · · · · · · · · · · · · · ·
			Old South Iron, LLC			
				Firm/Company		
			9678 N Goldenbell Way			
				Address		
			Crystal River, Fl 34428			
				City/State and Zip Code		
			oldsouthironllc@gmail.com E-mail address: (t	o be used for future annual i	report notification)	
For furtl	her inform	nation conc	cerning this matter, please ca		,	
Kaatjeluke Wells				352 270 at ())-2557	
		Name of Po	erson	Area Code	Daytime Telepho	ne Number
Enclose	d is a chec	ck for the f	ollowing amount:			
□ \$25	.00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl		\$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

Old South Iron, LLC			
(Name of the Lim	ited Liability Company as it now appear (A Florida Limited Liability Company)	's on our records.)	
The Articles of Organization for this Limited I	iability Company were filed on No	ovember 13, 2023	and assigned
lorida document number 1.23000512574	· · · · · · · · · · · · · · · · · · ·		
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name	of the limited liability company he	<u>ere</u> :	
he new name must be distinguishable and contain the	d. Milinia d Linkilla Commun. Valo d	bolometics will Compaths whi	maniation vI 1 C."
he new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation LLC of the abo	reviation 1.1C.
inter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
	-,		2023 SEC
		C Ar	CRE I
nter new mailing address, if applicable:		AS	REJA
Mailing address MAY BE A POST OFFICE	F ROY		
Hunng address MAT BE A FOST OF FICE	<u></u>		· ·
		- DRID	
. If amending the registered agent and/or	registered office address on our r	G	Ti
ent and/or the new registered agent and/or		ecorus, <u>enter the name</u>	For the new regis
Name of New Registered Agent:	Kaatjeluke Wells		
New Registered Office Address:	9678 N Goldenbell Way		
	Enter Flor	rida street address	
	Crystal River	Florida ³⁴⁴	28
	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.

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Daniel L Wells	9678 N Goldenbell Way, Crystal River Fl 34428	□Add
			■Remove
			□Change
			🗀 Add
			□Remove
			□ Change
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record specifies a delayed effective date, but i	oot on offaction tim	no ut 17:01 o n	s an the englise o	€ (h) - Tha O	Oth day of	Oorth.
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