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COVER LETTER

The Graytian Group, LLC Name of Limited Liability Company The enclosed Articles of Amendment and feets) are submitted for filing Please return all correspondence concerning this matter to the following: Wendy Kearns Name of Person The Graytian Group, LLC Firm/Company	Division of Cor	poracions			
Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing Please return all correspondence concerning this matter to the following: Wendy Kearns Name of Person The Graytian Group, LLC Firm/Company		an Group, LLC			
Please return all correspondence concerning this matter to the following: Wendy Kearns Name of Person The Graytian Group, LLC Firm/Company	JECT:	Name of Limit	ted Liability Company	<u>-</u>	
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Name of Person The Graytian Group, LLC Firm/Company	e return all correspo	ondence concerning this matter to	o the following:		
The Graytian Group, LLC Firm/Company		Wendy Kearns			
Firm/Company			Name of Person		
		The Graytian Group, LLC			
			Firm/Company		
11310 South Orange Blossom Trail #161		11310 South Orange Blosso	om Trail #161		
Address			Address		
Orlando, Ft. 32837		Orlando, FL 32837			
City/State and Zip Code			City/State and Zip Code		
TheGraytianGroupLLC@gmail.com					
E-mail address: (to be used for future annual report notification)		E-mail address: (te	be used for future annual report notification)	202 SE	
For further information concerning this matter, please call: Wendy Kearns H-mail address: To be used for future annual report notification) 407 855-1143	urther information e	oncerning this matter, please cal	11:	는 (대 <u>대</u> 는 (대 <u>대</u> (전 전 <u>대</u>	:
Wendy Kearns 407 855-1143 27 1	dy Kearns			B 27	
Name of Person Area Code Daytime Telephone Number O ATI S S Enclosed is a check for the following amount:	Name o	f Person	Area Code Daytime Telephor	ne Number (1)	
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■ \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)	25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	

TO:

Registration Section

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

The Graytian Group. LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	v Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number L24000028801	ompany were filed on 1/13/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
Graytian Group, LLC		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or t	
Enter new principal offices address, if applicable:		2024F
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		27 AM 9: 34
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	l office address on our records, enter the	name of the new registered
New Registered Office Address:		
	Enter Florida street address	
	. Florida	1
	City	Zip Code
New Registered Agent's Signature, if changing Registered	1 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

<u>Title</u>	Name	Address	Type of Action
			□Add
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