

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
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2024 MAY 28 PM 3: 08

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our ted Liability Company)	records.)						
The Articles of Organization for this Limited Liability Comparing document number L24000111156	any were filed on 3-4-24		and assigned					
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limited b	iability company here:							
The new name must be distinguishable and contain the words "Limited Li	lability Company," the designation	"LLC" or the abb	reviation "L.L.C."					
Enter new principal offices address, if applicable:								
Principal office address MUST BE A STREET ADDRESS	<u> </u>	1.71	20					
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Inter new mailing address, if applicable:			28					
Mailing address MAY BE A POST OFFICE BOX)		35. 1.	P					
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		<u> </u>	09					
3. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, y	enter the name	of the new regis					
Name of New Registered Agent:								
New Registered Office Address:			·					
	Enter Florida street	address						
	Cin	_, Florida	Zip Code					
	City		zip Coae					

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, gnter 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
AMBR	Barbara J Hoyt	271 Hugh Thomas Drive	□Add
		Panama City, FL 32404	■Remove
			Change
			□Add
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		4-11-24			
fective date, if other t	e date must be specific a in this block does not	and cannot be prior to date t meet the applicable st		_(optional) ays after filing.) Pursuant to ents, this date will not be	
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nte: If the date inserted in cument's effective date of ecord specifies a delayed	·	ot an effective time, at	12:01 a.m. on the earlie	er of: (b) The 90th day a	fter the
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ote: If the date inserted in ocument's effective date	d effective date, but n	a member or authorized r			fter the