L24000124591

(R	equestor's Name)	
(A	ddress)	
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(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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04/04/24--01022--003 ** 30.00

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COVER LETTER

TO: Registration Division of C	Section Corporations	•	
	ohnson Outdoor Services LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Monica L Johnson		
		Name of Person	
	Henry Johnson Outdoor S	ervices LLC	
		Firm/Company	
	2850 34th St N #1072		
		Address	
	St. Petersburg, FL 33713		
		City/State and Zip Code	
	monica@hjoutdoor.com	10.00	
For further information	n concerning this matter, please o	(to be used for future annual report notical):	meanon)
Monica L Johnson	φ	727 550-6476	
	ne of Person	at ()	ne Telephone Number
Nan	ic of Person	Area Code Payon.	receptore Number
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing Fee	e ■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Ado</u>		Street Address:	SECRL APR -4
Registration Of Division Of States	on Section f Corporations	Registration Se Division of Co	moratione
P.O. Box 6	5327	The Centre of T	Tallahassee
Tallahasse	e, FL 32314	2415 N. Monro Tallahassee, FI	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HENRY JOHNSON OUTDOOR SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Comp	oany were filed on 03/12/2024	and assigned
Florida document number L24000124591		
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," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		 -
(Principal office address MUST BE A STREET ADDRES		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records,	
New Registered Office Address:	Enter Florida street	
	Cirv	Florida Zip Code
	City	
New Registered Agent's Signature, if changing 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
CEO	Henry D Johnson Jr	810 55th Ave S, St. Petersburg, FL 33705	= Add
			□Remove
			□Change
President	Monica L Johnson	810 55th Ave S, St. Petersburg, FL 33705	≅ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			TA DE move
			□ Change

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		02/12/2021				
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n effective date is listed, the date mute: If the date inserted in this b	ast be specific and o block does not me	cannot be prior to cet the applical	o date of filing or m ble statutory filin	ore than 90 days after g requirements, this	nting.) Pursua date will no	int to 605.0201 of be listed as
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ecord specifies a delayed effecti	ve date, but not a	an effective tin	ne, at 12:01 a.m.	on the earlier of: (b) The 90th	day after the
s filed.						
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March 27 ted		2024	· a			2024 APR -4
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	Signature of a m	ember/or author	ized representative	of a member	E'S	
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Filing Fee: \$25.00