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08/03/24--01012--014 **25.00



COVER LETTER

FO: Registration S Division of Co			
	R E. WALKER, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are subt	nitted for tiling.	
Please return all corresp	condence concerning this matter t	o the following:	
	JENNIFER E. WALKER		
		Name of Person	
	JENNIFER E. WALKER.	LLC	
		Firm/Company	
	2700 CROTON ROAD, A	PT 2-25	
		Address	
	MELBOURNE, FL 32935		_
	MUSESICK (@HOTMAIL E-mail address: (City/State and Zip Code COM to be used for future annual report notifica	tion)
For further information	concerning this matter, please ea	all:	
JENNIFER E. WALK	ER	321 216-6580 at ()	
Name	e of Person	Area Code Daytime To	elephone Number
Enclosed is a check for	r the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Add Registratio Division of P.O. Box 6	n Section Corporations	Street Address: Registration Secti Division of Corpo The Centre of Tal	orations lahassee 💸 🛬
Tallahassee	e, FL 32314	2415 N. Monroe S	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Compat (A Florida Limited L	ny as it now appears	on our records.)
· · · · · · · · · · · · · · · · · · ·	(A Florida Limited L	iability Company)	-
The Articles of Organization for this Limited L		were filed on $\frac{05/0}{}$	and assigne
florida document number L24000211195	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	of the limited liabi	lity company her	<u>re</u> :
The new name must be distinguishable and contain the v	words "Limited Liabil	ity Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	2700 CROTON R	ROAD, APT 2-25
Principal office address MUST BE A STREE	ET ADDRESS)	MELBOURNE, E	FL 32935
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	BOX)		
D. 16	or of the second of the second		
B. If amending the registered agent and/or agent and/or the new registered office addre	• •	address on our rec	cortis, enter the name of the new re
Name of New Registered Agent:			
New Registered Office Address:	2700 CROTON	ROAD, APT 2-25	
		Enter Floria	da street address
	MELBOURNE		, Florida <u>32935</u>
	- 	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.

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>	Address	Type of Action
			□Remove
			□Change
			□Remove
			□Change
	<u></u>		□Add
			□Remove
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record specifies a delayed effective date, but not an effective	licable statutory fi	or more than 90 d filing requireme	ays after filing.) ints, this date v	will not be listed a
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	atima at 12:01 au	m, on the onelic	er of: (b) The	e 90th day after the
	time, at 12.01 u.i	in. On the carry		e 70th day after the
M 137 20 2024				
Dated MAY 29 , 2024	·			
CANNONON				
Signature of a member or a		itive of a member	 r	(7 23
JENNIFER E. WALKER	ithorized representati		:	

Filing Fee: \$25.00