## 124000351622

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(Document Number)
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## **COVER LETTER**

Division of Cor			
SUBJECT:	Warne of Limit	ed Liability Company	LC_
	. ()	, , ,	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ondence concerning this matter to	o the following:	
	<u> Frio</u>	S TOWN Name of Person	
	<u> </u>	ONU'S Claus	LLC.
	11445 Sw	Halton St. P	<b>3</b> 3
	Pat St	City/State and Zip Code	34987
	E-mail address: (to	be used for future annual report no	tification)
For further information c	concerning this matter, please cal	li:	
	W 1 of Person	at (609) 458. Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	\$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)

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

Murphy's (	Claw UC	
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
	<del></del>	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the ab	previation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	<u>RESS)</u>	
		<u>; - 22                                 </u>
		- 8
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		9 -
		Sh. 역
B. If amending the registered agent and/or registere	d office address on our records, <u>enter the nam</u>	e of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 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
	Markenzie Braun	11445 Sw Halton St	□Add
		Pod SILVER PL 34987	t√Kemove
			Change
<u> </u>	Kayleigh Brown	11445 SW Halton St Port St Louise FL 3498	□Add
	v .5	Root St Louise FL 3498	7 Remove
			□Change
			□Add
			□Remove
			□Change
1 <u>M3</u>	R Erin Brown	11445 SW Halton St	(DAdd
		Part St Lucie FL 349	87 □Remove
		<u> </u>	\(\sum \) Change
	AMBR_		□Add
		<del></del>	□Remove
			Change
			□Add
			□Remove
			Changa

. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff Note:	ve date, if other than the date of filing:
the record cord is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	October 16 , 2024.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00