L24000470024

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Document Number)
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2024 NOV 21 PH 1: 43
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

Division of Con	rporations				
	Hall Associates LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Baillic Sigman				
		Name of Person			
	API Law				
		Firm/Company			
	260 S 1200 W				
		Address			
	Orem, UT 84058				
		City/State and Zip Code			
	filings@api.law				
•	E-mail address: (to be used for future annual report notifi	ication)	,,, r. 	
For further information of	concerning this matter, please c	all:		DZ4 I	1.27 ^{p.}
Baillie Sigman		888 521-0322		AOV 2	i .
Name o	of Person	Area Code Daytime	Telephone Number	2024 NOV 21 PM 1: 43 SECRETARY OF STAT TALLAHASSEE, FL	
Enclosed is a check for t	he following amount:			I: 43 STAT I, FL	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Co	ng Fee, Moof Status &	

Mailing Address:

Registration Section

TO:

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

Thomas & Hall Associates LLC		
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com	npany were filed on 11/6/2024	and assigned
Florida document number L24000470024		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	I Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		ــــــــــــــــــــــــــــــــــــ
(Mailing address MAY BE A POST OFFICE BOX)		SE O
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		2 元
B. If amending the registered agent and/or registered o	ffice address on our records, <u>enter th</u>	e name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		<u>Γ</u>
New Registered Office Address:		
	document number L24000470024 Internation is submitted to amend the following: Internation name, enter the new name of the limited liability company here: Internation in the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." International offices address, if applicable: International office address MUST BE A STREET ADDRESS) International office address MUST BE A POST OFFICE BOX) International office address on our records, enter the name of the new registered indoor the new registered office address here: Name of New Registered Agent:	
	·	
	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>	Name	Address	Type of Action
MGR MGR	Hugh Thomas	4522 W Village Dr. #6198	
		Tampa FL, 33624	□Remove
			■ Change
MGR	Mark Hall	4522 W Village Dr. #6198	□Add
		Tampa FL, 33624	□Remove
			■Change
			SERRETIGHAN OF ANT AT EMOVE
			□Change
			□Add
			Remove
			□Change
			□Add
			□ Remove
			□ Change

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ffective date, if other than the d an effective date is listed, the date must be total. If the date inserted in this block occument's effective date on the Dep	e specific and cannot k does not meet the	applicable sta			filing.) Pursuant to 605.0	
record specifies a delayed effective of the filed.	late, but not an effe	ective time, at 1	12:01 a.m. on t	he earlier of: (b)	The 90th day after	the
	AAA.	1				
November 14th atcd	2024					
9.4 H Q C	<u>2024</u>					
9.4 H Q C	gnature of a member		presentative of a	member		