## L21000035868

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DOWN JULY LLC  Name of Imited Unbility Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following.
LUANNA PLIPZ  Name of Person  bidy by lull  Firm Company
Firm Company
7440 North Kendall Drive
Apt 1604 Miami FL 3315 6  City/State and Zip Code  Info @ body by 1414. (cm  E-mail address: tio be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (305) 283-0131  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Scrifficate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)  S55.00 Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section  Street Address: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1 32314

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

	behilalulu LLC				
4Name of the Limited Lia	ability Company as it now appears on our records.) orida Limited Liability Company)				
The Articles of Organization for this Limited Liabilit	of Organization for this Limited Liability Company were filed on 19, 2021 and assigned				
This amendment is submitted to amend the following	<del>i</del> :				
A. If amending name, enter the new name of the l	limited liability company here:				
The new name must be distinguishable and contain the words "	"Limited Liability Company," the designation "LLC" or the	: abbreviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET AD	ODRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)	2				
B. If amending the registered agent and/or registe					
agent and/or the new registered office address her		nie of the new registerer			
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address	7 8 38 TELES			
	, Florida				
	Cny	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

Title	Name	Address	Type of Action
MCR	Luanna Perez	7440 N Kenchill Drive	Sadd
		Apt 16C4	TRemove
		Hiami, FL 33156	
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			@Remove
			□Change
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n etle te:	etive date, if other than the date of filing:  Hective date is listed, the date must be specific and cannot be prior to date of filing or more than 90.  If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	(optional) days after filing.) Pursuant to 6/15 020 tents, this date will not be listed :
ши	nem y eneed to date still the trepaints and the street en	
s tīle	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl filed.	
ed _	1 March 24 2021.  Signature of a member or authorized representative of a member of a March 1 12000 1200 1200 1200 1200 1200 1200	
	Signature of a member or authorized representative of a memb	er -
	Luanna, Perez Typed or printed name of signee	

Filing Fee: \$25.00