L21000278737

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(- yy
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400381013704

92/14/22--01012--010 **25.00

2022 FEB 14 AM 10: 45
SECRETARY OF STATE
STALLAHASSEE, FL

A. BUTLER FEB 2 5 2022

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
SUBJECT:	· ClickERUPI	(VERVILLANCH	
SUBJECT:	Name of Lim	CKERY IOHODSH ited Liability Company	
<u> </u>			
	Gr	·	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	i.
Please return all corresno	indence concerning this matter	to the following:	
	M h	·	4 - 1 - 1 - 1 - 1
\$		THAOLY NGO	
	-	Name of Person	
	_		
	CL	CKERY PICKERYWHO	XOSH UC
		гипи Сопрану	
	12706	INJAIN OR F	
	$\underline{\qquad}$	101ND DR F	
	MYAKKA C	City/State and Zip Code	···
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
		• , }	
LilL	Y N(70	at (317_) 938-	- 3098
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.
·	Certificate of Staffas	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
Mailing Address	e-	Street Address	
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Se	ction
Division of C		Division of Cor	
P.O. Box 632		The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

	CKERYWHOUREBILL AMID: 45
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	ability Company) SECRETARY OF STATE
The Articles of Organization for this Limited Liability Company	JACLAMINSSEE, FL
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
CLICKERYPICKERYWHOOS The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	28706 102ND DR E.
(Principal office address MUST BE A STREET ADDRESS)	MYAKKA CITY, FL 34251
Enter new mailing address, if applicable:	28706 102NA DR F.
(Mailing address MAY BE A POST OFFICE BOX)	MYAKKA CITY, FL 34251
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
N GNA Project A	140; V 2160
Name of New Registered Agent: 7+1	IAOLY NGO
New Registered Office Address: 2970	6 102 ND DR E. Enter Florida street address
NHKKZ	A CITY
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>	<u>Name</u>	Address	Type of Action
MGR ANBK	CFCILIA NGO	28706 102 NO DR F	□Add
		MYAKKA CITY, FL 34251	Nemove
			Change
			□Add
			□Remove
			🗆 Change
		i .it ,	□ Add
	e de la companya de l		□Remove
			□Change
			□Add
	·		□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
	ou ou	कि एक स्मृत्य वह स्थितिक हैं। क	□Remove
			□Change

	Please	chai	ncie Li	Dall-E	LLC	$-t_{\odot}$	Cliden.	Pickenlika	Sh LLC
	Please	chane	agent	Dall - E Cecilia HANK YOU	<i>Des</i>	·to	76001	y NG3	
			- J	el a lu ca	\		(] 77	
				HAMIC YOU	<u>/</u>				
				<u>-</u>					
			-						
<u></u>							<u>.</u>		
									_
									
								<u> </u>	
		. 							
				<u> </u>			<u>.</u>	···	
									
	<u>-</u>						<u>-</u>		
									<u>_</u>
					•				•
(If an effecti <u>Note:</u> If t	ve date is listed, t	he date must be d in this block	e specific and ca k does not mee	ASA Pannot be prior to date the applicable te's records.	te of filing or			ling.) Pursuant to	
If the record spectral is filed.		ed effective d	late, but not an	effective time,	at 12:01 a.n	a. on the	earlier of: (b)	The 90th day a	after the
Dated		2		. ,	nl I				
		Si	gnature of a mei	mber or authorized	l representati	ve of a me	ember		
		· · ·	Ty	THA yped or printed na	OLY M me of signee	GO_			-