L22 000 289 702

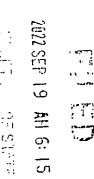
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100393708781

09/16/22--31081--011 **60.03



A. BUTLER
DEC 1 4 2022

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	entral St Name of Lim	ited Liability Company	11c
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kassundra	Shura Name of Person	
		Star Stipme	9 (C
	0.969 hing	Address	
	Merdo	City/State and Zip Code 2 a Smail-Cam to be used for future annual report noti	
	b atraspert E-mail address: (2 a Gmail-Cam to be used for future annual report noti	fication)
	oncerning this matter, please can arrillo Alme of Person	ill: My at (407) 624- Area Code Daytim	- 10 c/ 3 ne Telephone Number
Enclosed is a check for the	ne 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

	OF	
(Name of the Limited	Liability Company as it now appears. Florida Limited Liability Company	on our records.)
The Articles of Organization for this Limited Liab	• •	26-27-2022 and assigned
Florida document number $\underline{L2200028976}$	<u>02</u> .	
This amendment is submitted to amend the follow	ring;	
A. If amending name, enter the new name of the	he limited liability company he	r <u>e</u> :
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address		cords, enter the name of the new registered
Name of New Registered Agent:	Kassandra	Slerra
New Registered Office Address:	Enter Flor	da street address
		. Florida
	Ciţy	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 howamoss d.	Type of Action
Ambl	Lassanda Dera	Address 1944 Wingingmoss Rd. Orlando (12 32007	⊡ Add
			□Remove
			□Change
			⊡ Add
			□Remove
			Change
			□Adđ
			□ Remove
		·- <u>-</u>	□Change
			□Add
			□Remove
		 	□Add
			□Change
			□Add
			□Remove
			☐ Change

										
										
-			·				. —			
					· - · · · · · · · · · · · · · · · · · ·					
								·		
	·	-								
			·							
				 						
				,				· - · - ·	 	
-									·———	
			 -			<u>.</u>			-	
										
										
n effecti <u>)te:</u> f 1	ive date is liste the date inser	d, the date mu ted in this b		ind cannot b i meet the :	applicable s		ore than 90 day:		Pursuant to 605, vill not be liste	
ecord s is filed.		layed effecti	ve date, but r	iot an effec	tive time, a	t 12:01 a.m. c	on the earlier	oti (b) The	90th day after	r the
ted _	septem	wer	13	. 20	22.					
			./	/						
			15 6							
	(Signature of 	a member o	r authorized	representative	of a member –			