

(((H23000184563 3)))



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## ... LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ADITUS SOLUTIONS GROUP LLC

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M. SOLOMON MAY 2 2 2023

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## **COVER LETTER**

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то:	Registration Se División of Cor			•	<b>₹</b> ·	
		ADITUS SOLI	JTIONS GROUP LLC			
SUBJE	CT:	Name of Lim	ited Liability Company		<del></del>	
		Amendment and fee(s) are sub	Ţ			
		LOVETTE DOBSON				
			Name of Person			
		·	Firm/Company			
		17350 STATE HWY 249	STE 220			~>
		HOUSTON TX, 77064	Address			₹ } 2029 HAY
		EFILE1234@INCFILE.CO	City/State and Zip Code		 5377 7477 7577	3 [
For furth	ner information c		to be used for future annua	Preport notification)		94:01 HW
	TE DOBSON		at ()	888-462-3453	Ç.	<u>.</u>
	Name o	f Person	Area Code	Daytime Telephone	Number	
Enclosed	d is a check for th	ne following amount:				
≣ \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en	iclosed) C	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)	
	Mailing Addres Registration 5	Section		ration Section		
	Division of C P.O. Box 632 Tallahassee, I	7	The Co	on of Corporations entre of Tallahasse J. Monroe Street, S	e	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H23000184563 3)))

ADITUS SOLUTIO			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appear Liability Company)	s on our records.)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	01/26/2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	hity Company," the de	esignation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			2028
			·
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			27 = 1
-			45. <b>9</b>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our re	cords, enter the name	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
And the Control of th	Enter Flori	da sirvei address	
		, Florida	
	Cuiv		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of i provided for in C	my duties, and I am fa hapter 605, F.S. Or, if	miliar with and this document is
If Char	nging Registered Age	nt. Signature of New Regis	tered 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: (((H23000184563 3)))

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	BILL T MACAULEY	T MACAULEY 333 AVENUE A NE	
		WINTER HAVEN, FL 33881	=Remove
			Change
AMBR	RICHARD DICKS JR	1041 ALABASTER WAY	<b>=</b> Add
		DELTONA, FL 32725	©Remove
AMBR	MARMAC IDEA GROUP LLC	333 AVENUE A NORTHEAST	
		WINTER HAVEN, FL 33881	□Remove
			2023 HAY
			20 Address
			ୁଜ <b>≥</b> []
			47
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(II an effective date is I <u>Note:</u> If the date in	other than the date of filing:	'ursumt to 69; iH not be list	5.0207 c ted as fl	ieh) he
the record specifies a cord is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	90th day afte	r the	
Dated May 18th	2023			
	4) ( 4 () ()			
	Richard Mills B Signature of a member or authorized representative of a member			