## 123000128857

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A. RIVERS JUN 1 0 2023

## **COVER LETTER**

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TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
	ESTATE 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	endence concerning this matter	to the following:	
	AUNDRE SCOTT		
		Name of Person	
	MITRE ACCOUNTING &	ETAX SERVICES, LLC.	
		Firm/Company	<del></del>
	1635 E HIGHWAY 50, ST	E 206	
		Address	<u></u>
	CLERMONT, FL 34711		
		City/State and Zip Code	
	taxes@mitreaccountingand	ax.com to be used for future annual report not	it serious
			inteation)
For further information c	oncerning this matter, please c	all:	
AUNDRE SCOTT		352 242-9905 at ()	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C	Section Corporations	Street Address: Registration Se Division of Co The Centre of	rporations
P.O. Box 632 Tallahassee, 1			pe Street, Suite 810

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRAMES ESTATE LLC			
(Name of the Lie	nited Liability ( (A Florida Lii	Company as it now appears on omitted Liability Company)	our records.)
The Articles of Organization for this Limited	Liability Com	pany were filed on 03/13/20	23 and assigned
lorida document number L23000128857			
his amendment is submitted to amend the fo	ollowing:		
. If amending name, enter the new name	of the limited	l liability company here:	
WA.			
he new name must be distinguishable and contain the	words "Limited	Liability Company," the designa-	tion "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appl	icable:	N/A	
Principal office address MUST BE A STRE	ET ADDRES	<u></u>	
			123 123
nter new mailing address, if applicable:		N/A	59 7
<u> Iailing address MAY BE A POST OFFICI</u>	EBOX)	<del></del>	182 No. 1
			List I
			30 3 0
If amending the registered agent and/or ent and/or the new registered office addr	registered of	fice address on our records	s, enter the name of the new registe
en and/or the new registered office addr	ess nere:		ōm v
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida stre	et address
			, Florida
		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>	<u>Name</u>	Address	Type of Action
MGR	DILAN H. FRAME	152-17 125TH AVE	□Add
		OUEENS, NY 11434	□Remove
			🗏 Change
		<del></del>	🗀 Add
			□Remove
			Change
			□Add
			□Remove
			☐ Change
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			□Remove
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			□Remove
			☐ Change
			□Add
			□Remove
			□ Change

Effective date, if other than the date of filing:  In a effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 608 Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d is filed.  Litth APRIL  2023		
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	<del></del>	
Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00