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TILED MAY 25 AM IO: I

COVER LETTER

TO: Registration Se Division of Cor							
SUBJECT: Glasser	Unlimited, L.L.C.						
	Same of Lim	ited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspo	ndence concerning this matter	to the following:					
	Carmen Glasser						
	Carrier Glasser	Name of Person					
		_					
	Glasser Unlimited, L.L	C. Firm/Company					
		типосотрану					
	120 Palm Way						
		Address					
	Indialantic, FL 3290	ર					
	Indialantic, 1 E 3230	City/State and Zip Code					
	CADMEN GIASSE	,					
	E-mail address: ($\mathcal{R} \underline{\mathcal{C}} \underline{GMAIL} . \underline{CoM}$ to be used for future annual report notific	ration)				
For further information e	oncerning this matter, please c	all:					
Carmon Classor		221 / 201					
Carmen Glasser Name of Person		at (SZ 1) LGOM 7 G Area Code Daytime	at (321) 604 - 602 3 Area Code Daytime Telephone Number				
		·	·				
Enclosed is a check for th	ne following amount:						
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Cert/ficate 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		<u>Street Address:</u> Registration Sect Division of Corp					
P.O. Box 6327		The Centre of Ta	The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 25 AM 10: 11

Glasser Unlimited, L.L.C.			SECRETARY OF STATE
(Name of the Limit	ted Liability Compar (A Florida Limited I.	ny a <u>y it now appears on our record</u> hability Company)	L) TALLAHASSEE, FL
The Articles of Organization for this Limited L	iability Company	were filed on 02/11/2008	and assigned
florida document number <u>L08000015177</u>	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, <u>enter the new name o</u>	f the limited liabi	lity company here:	
The new name must be distinguishable and contain the v	vords "Limited Liabil	ity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:		
Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address <u>MAY BE A POST OFFICE</u>	BOX)		
	<u></u>		
B. If amending the registered agent and/or in agent and/or the new registered office addre		ddress on our records, <u>enter</u>	the name of the new registers
			
Name of New Registered Agent:	Carmen Glas	ser	
New Registered Office Address:	120 Palm V		
		Enter Florida street addres	
	Indialantic	, Fl	orida 32903
		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 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
	<u></u>		□Add
			□Remove
			□Change
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an effective date is hi <u>(ote:</u> If the date in:	sted, the date must be serted in this block e date on the Dep:	e specific and c c does not me artment of Sta	cannot be prior (set the applica ate's records.	o date of tiling o	lling requireme	ays after filing.) nts. this date v	vill not be l	isted as
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an effective date is history. If the date in ocument's effective record specifies a data it filed.	sted, the date must be serted in this block e date on the Department delayed effective d	e specific and control and con	annot be prior (set the applicate's records. In effective tii 2022	a date of filing of the statutory in the	lling requireme	ys after filing.) nts. this date v	vill not be l	isted as

Filing Fee: \$25.00