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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Valeanu & Mullins Enterprises, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Addison

Name of Person

Valeanu & Mullins Enterprises LLC

Firm/Company

7364 Lagoon Rd

Address

Spring Hill, FL 34606

City/State and Zip Code

kaddison60@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Addison

,,,352,942-406

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

3 FEB 21 PH 4: 00

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Valeanu & Mullins Enterprises	, LLC	
	oility Company as it now appears of ida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabili Florida document number L0900056054		
This amendment is submitted to amend the followin	g:	
A. If amending name, enter the new name of the	limited liability company here:	
Addison & Mullins Enterprises, LLC.		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	
B. If amending the registered agent and/or registered agent and/or the new registered office		r records, <u>enter the name of the new</u>
Name of New Registered Agent:		WAY-
New Registered Office Address:		
-	Enter	· Florida street 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Man MGRM = M	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Remove
			Add
			Remove
			_
			Add
			Remove
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			Remove
			

company only. All other information remains	
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Mullis	
ignature of a member or authorized representative of a me	ember
	Mullins

Page 3 of 3

Filing Fee: \$25.00