L09000123009

(Re	equestor's Name)	
(***	,400.07017011107	
(Ac	idress)	
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(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
		
Special Instructions to	Filing Officer:	
April H		
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A Company of the Comp

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L09000123009	were filed on 12-30-2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	12409 42nd Ave Dr W, 881	
Principal office address MUST BE A STREET ADDRESS		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 881 Cortez FL 34215	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:	Enter Florida street address , Flori	daZip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

company has been notified in writing of this change.

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>l'itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Dawn Mishler		□ Add
			■Remove
			☐ Change
			□Add
			□Remove
			⊡Change
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			Change

	
tive date, if other than the date of filing: (optional)	Z0 = 0 =
flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Por If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi	ursuant to 605.02 Il not be listed
ment's effective date on the Department of State's records.	
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 9	Oth day after th
filed.	
12-13 2022	
1	
12-13 2022 Ang Mules Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	