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R. HUNT

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:	Web 14	JOTO Siles L	40
		ited Liability Company	41-0
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
		115 Obrec	
	Neb A	JTO SAles L	LC in a
		Firm/Company	The contract
	Melbo	Address  URNE H 3  City/State apt/Zip/Code	2934 "
	100150 C	City/State and Zip Code  COG ATO CFA to be used for future annual report noti	rsales. can
For further information ec	oncerning this matter, please ca	all:	
Louis C	bre 601	at ( <u>321)</u> 343 Area Code Daytim	- 9209 c Telephone Number
England is a short factor	a Callandina managari		
Enclosed is a check for the S25,00 Filing Fee	_	□ \$55.00 PH P 9.	F) \$60.00 PE P
<b>№</b> 323,00 Fining Fee	S30.00 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)
Mailing Address		Street Address:	
Registration S Division of Co		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	•

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF The Articles of Organization for this Limited Liability Company were filed on Florida document number 410000012382 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.I.C" or the abbreviation "L.I.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 5 Dow 70 Sv: Te 1

Enter Florida street address

DOUTNE Florida 329

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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
MBR	Louis Obregon	4025 Dow Rd Suite	L BAdd
		Molbourne FL 329	<u>C</u> 24□Remove
			□Change
MGR	Maureen Obneson	1) 4025 Dow Ad Svile	
		Notbourne H 32934	NRemove
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fective date, if other than the effective date is listed, the date in	iust be specific and	cannot be prior to	date of filing or n	nore than 90 days			
ote: If the date inserted in this cument's effective date on the			le statutory film	ig requirements	, this date w	ill not be list	ed as
ecord specifies a delayed effec is filed.					f: (b) The	90th day afte	r the
ded October	14 1/2.	2022					
	771		11/11				
ded October	1/1800	zaen/	Clay	<u> </u>			

Filing Fee: \$25.00