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(((H23000426934 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

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COVER LETTER

H23000426934

TO: Registration Se Division of Con			112300042093
	т Мападетепt, LLC		
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sonia Lowe, Paralegal		
		Name of Person	
	Baker & Hostetler LLP		
		Firm/Company	
	200 Civic Center Drive, S	nite 1200	
		Address	
	Columbus, Ohio 43215		
	davana Obakadawa aana	City/State and Zip Code	
	devans@bakerlaw.com E-mail address: (to be used for future annual report not	fication)
For further information of	oncerning this matter, please c	all:	
Sonia Lowe		614 598-3033 	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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)
<u>Mailine Addres</u> Registration !		<u>Street Address:</u> Registration Se	
Division of C P.O. Box 632	Corporations	Division of Cor The Centre of T	
Tallahassee,		*	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H23000426934

(Name of the Limited Liability Con (A Florida lamb	ponty as it now appears on our records.) ed Liability (Company)	
e Articles of Organization for this Limited Liability Compa	лу were filed on <u>01/19/2011</u>	and assigned
rida document number L11000007978		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited li	ability company here:	
		<u>~~</u>
new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the	abbreviation."L.L.C."
ter new principal offices address, if applicable:	Attn: Simon Richard Jackson	,
rincipal office address MUST BE A STREET ADDRESS	5780 Golden Hawk Way	
menut office train is a meet 1925 m.	Kissimmee, FL 34746	
W. M. Washin	Attn: Simon Richard Jackson	- -
ter new mailing address, if applicable:	5780 Golden Hawk Way	
<u> [ailing address MAY BE A POST OFFICE BOX]</u>		
If amending the registered agent and/or registered offi	Kissimmee, FL 34746 ce address on our records, enter the n	ame of the new regis
If amending the registered agent and/or registered offient and/or the new registered office address here: Name of New Registered Agent:		ame of the new regis
ent and/or the new registered office address here: Name of New Registered Agent:		ame of the new regis
ent and/or the new registered office address here:		ame of the new regis
ent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, enter the n	
ent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, <u>enter the n</u>	
ent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, enter the n Enter Florida street address , Florida	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: H23000426934

MGR = Manager AMBR = Authorized Member

Title .	Name	Address	Type of Action
MGR	Simon Richard Jackson	5780 Golden Hawk Way	■ Add
		Kissimmee, FL 34746	□Remove
			□ Change
MGR	Graham Wilding	5780 Golden Hawk Way	□Add
		Kissimmee, FL 34746	■ Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			Change
		·	□Add
			□Remove
			Change

				
				
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		time, at 12:01 a.m. on the e	earlier of: (b) The 90th day	after the
	ve date, but not an effective			
rd is filed.	ve date, but not an effective	·		
e record specifies a delayed effecti rd is filed. Dated November 28 /s/ Simon Richard J	, 2023 ackson	thorized representative of a me		_

Filing Fee: \$25.00

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