L12000/42992

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COVER LETTER

ction poratio ns		4
LLC		
Name of Limi	ted Liability Company	
Amendment and fee(s) are sub-	mitted for filing.	
ndence concerning this matter	to the following:	
Andrew Hoek		
	Name of Person	
Dewitt Law Firm P.A.		
	Firm/Company	
1560 W Cleveland St		2023 (1)
	Address	
Tampa, FL 33606		S
	City/State and Zip Code	77
_		Ification)
	813 251-2701	
f Person	Area Code Daytir	ne Telephone Number
he following amount:		
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)
ss: Section	Street Address: Registration S	ection
Corporations	Division of Co	orporations
27 FI 32314		Tallahassee oe Street, Suite 810
	Amendment and fee(s) are substandence concerning this matter: Andrew Hoek Dewitt Law Firm P.A. 1560 W Cleveland St Tampa, FL 33606 andrewhoek@dewittlaw.com E-mail address: (concerning this matter, please concerning this matter, please concerning this matter) \$30.00 Filing Fee & Certificate of Status	Amendment and fee(s) are submitted for filing. Andrew Hock Name of Person Dewitt Law Firm P.A. Firm/Company 1560 W Cleveland St Address Tampa, FL 33606 City/State and Zip Code andrewhock@dewittlaw.com E-mail address: (to be used for future annual report not oncerning this matter, please call: at (

Tallahassee, FL 32303

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

Florida document number L12000142992 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:		
Florida document number L12000142992 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 "LLC" or the abbrevia Enter new principal offices address, if applicable:		
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 "LLC" or the abbrevia Enter new principal offices address, if applicable:	and assigned	l
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 "LLC" or the abbrevia Enter new principal offices address, if applicable:		
Articles of Organization for this Limited Liability Company were filed on 11/13/2012 and assigned dia document number L12000142992 amendment is submitted to amend the following: f amending name, enter the new name of the limited liability company here: ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." or new principal offices address, if applicable: Company		
Enter new principal offices address, if applicable:		
• •	ntion "L.L.C."	
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
	<u>ت</u> ت	75+
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u>.</u> .
	- 	
		. •
B. If amending the registered agent and/or registered office address on our records, enter the name of the angle and/or the new registered office address here:	the newereg	istero
agent antiror the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
Enter Florida street address		
·	p Coae	

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>	Name	Address	Type of Action
MGR	DESILVA, PATHMANATH	1936 BRUCE B DOWNS BLVD, STE 176	🗀 Add
		WESLEY CHAPEL, FL 33544	=Remove
			🗆 Change
MGR	HOEK, ANDREW	1560 W. CLEVELAND ST	\(\sum_\) Add
		TAMPA, FL 33606	□Remove
			□Change
			🗆 Add
			DRefine ye
			☐Change
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(If an eff	ve date, if other than the date of filing:	605.0207 isted as
he recor ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a ed.	fler the
Dated	10/4/23	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00