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## **COVER LETTER**

TO:	Registration Se Division of Cor			
erub re	Santina, Ll	LC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Sandra Nesbit Willsey		
			Name of Person	<del></del>
			Firm/Company	
		3336 Dunwoody Ct		
		Clearwater, Fl 33761	Address	
		sandranesbit@gmail.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notific	cation)
For furt	her information c	oncerning this matter, please ca	all:	
Sandra	a Nesbit Willsey		727 614-4333 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
<b>র্ব্ব \$</b> 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)
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIE Registration Section Division of Corporat Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Santina, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number L13000013862	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<b>P</b> ×8 - 35 - 35 - 35 - 35 - 35 - 35 - 35 - 35
Enter new mailing address, if applicable:		<b></b>
(Mailing address MAY BE A POST OFFICE BOX)		
		0. AA
		8 OK
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:		er the name of the new
Name of New Registered Agent:		
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 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>	<u>Address</u>	Type of Action
MGR	Sandra Nesbit Willsey	3336 Dunwoody Ct	
		Oles	■ Add
		Clearwater, FL 33761	□ Remove
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