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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
SUBJECT:	ARYOL ENTE	ERPRISES LLC .	- N.
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
raease return an correspo	ndence concerning this matter	to the tonowing.	
	MARCELL	SuTHERLAND. Name of Person	
	MARVOL	ENTERPRISES Firm/Company	LLC.
		SSINA PLACE	
	Howey in th	CityState and Zip Code	HERPRISES TO THE Cation)
	MSUTHERLE E-mail address:	AND C MARVOLEN to be used for future annual report notifi	HERPRISES. TO A
For further information c	oncerning this matter, please ca	all:	,
MARCELL	Suther Harry	at (<u>407)</u> 730	1503 P C C C C C C C C C C C C C C C C C C
Enclosed is a check for the		,	·
☐ \$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 tadditional copy is enclosed)
Mailing Addres Registration S	Section	Street Address: Registration Sec	
Division of C P.O. Box 632	•	Division of Corp The Centre of Ta	
Tallahassee, 1			Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marvol ENterprises LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>.</u> 1
The Articles of Organization for this Limited Liability Company Florida document number W13000051211	were filed on 09.16.2013	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 Liabi	lity Company," the designation "ELC"	or the abbreviation D.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2550 AMER Groveland	CANESULAY:1
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		94 3: C6
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 t</u>	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flo	rido
	, F10	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
MGRM Eileen Pilliner	Eileen Pilliner	5973 NE 38 Place Silver Spring FL 34488	□ Add
			≣Remove
			□Change
_			□Add
			□Remove
		 	ZEGRET SPORET
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ffective date, if other that an effective date is listed, the da	in the date of filing: ate must be specific and cann	ot be prior to date o	f filing or more than 90	(optional)) days after filing.) Pursua	ant to 605.0207
lote: If the date inserted in ocument's effective date on	this block does not meet t	he applicable sta	tutory filing requirer	ments, this date will no	ot be listed as
record specifies a delayed e f is filed.	ffective date, but not an e	ffective time, at 1	2:01 a.m. on the ear	fier of: (b) The 90th	day after the
	20	23			
December 28 Pated					
Dated December 28	· _				

Filing Fee: \$25.00