L13000151218

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(313) 313(3.2.13)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

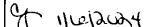
Office Use Only



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COVER LETTER

	Registration Section Division of Corporations				
· · ·		STOP PLUS LLC			
SUBJECT	:	Name of Lim	ited Liability Company		
The enclose	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:		
		ZENAIDA SANTIAGO			
		•	Name of Person		
		DOLLAR STOP PLUS LI	.C		
			Firm/Company		
		1235 PROVIDENCE BUI	EVARD SUITE, O		
			Address		
		DELTONA FL 32738			
			City/State and Zip Code		
		ZENAIDAPROLIFE@YA	HOO.COM to be used for future annual report not	Hiteorien	
For further	information ce	oncerning this matter, please of	•	(meanon)	
ZENAIDA	SANTIAGO		407 6907268		
	Name of	Person	at () Area Code Daytir	ne Telephone Number	
Enclosed is	a check for th	e following amount:			
	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)	
	ailing Address		<u>Street Address:</u> Registration Se	ection	
Registration Section Division of Corporations			Division of Corporations		
P.	O. Box 632	7	The Centre of	Tallahassee	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOLLAR STOP PLUS LLC

2023 070 18 71 7: 20

(Name of the Limited	Florida Limited I	ny as it now appears on our re- liability Company)	corgs.)
The Articles of Organization for this Limited Liab Florida document number <u>L13000151218</u>	ility Company	were filed on 10/28/2013	and assigned
his amendment is submitted to amend the follow	ing:		
a. If amending name, enter the new name of the	ne limited liab	ility company here:	
he new name must be distinguishable and contain the word	ds "Limited Liabii	ity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		751 RALEIG CT	
		DELTONA, FL. 32738	
Inter new mailing address, if applicable:		751 RALEIG CT	
Mailing address MAY BE A POST OFFICE BO	DELTONA, FL. 32738		
s. If amending the registered agent and/or registered affice address because in the new registered office address because in the new registered agent and on the new registered agent ag		address on our records, <u>en</u>	iter the name of the new regis
Name of New Registered Agent:	ZENAIDA SANTIAGO		
New Registered Office Address: 751 RALEIG		CT CT	
		Enter Florida street aa	ldress
	DELTONA		, Florida <u>32738</u>
		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>	Address	Type of Action
MGR	ZENAIDA SANTIAGO	751 RALEIGH CT DELTONA FL 32738	=Add
		1235 PROVIDENCE BULEVARD STE.O DELTO	NA ■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			Chanas

	
	
	
2. Effective date, if other than the da	ate of filing: (optional)
(If an effective date is listed, the date must b	e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(c does not meet the applicable statutory filing requirements, this date will not be listed as the
f the record specifies a delayed effective of ecord is filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
December 14	2023
Dated	
	0.4/_
Si	enature of a member or authorized representative of a member
	ZENAIDA SANTIAGO

Typed or printed name of signee