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T. MATTHEWS JUN 14 2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: AAPP, LLC Name of Limited Liability Company	
SUBJECT: Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ANTHONY PEYINGHAUS Name of Person	
Name of Person	
AADP LLC	
AAPP, LLC Firm/Company	
13799 PARK BLVD. #117	
Address	
SEMINOLE FL 33776	
City/State and Zip Code	
PEYINGHAUSA@GMAIL.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
ANTHONY PEYINGHAUS at 727 422-3260 Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate of Status □ \$60.00 Filing Fee, Certificate of Status	
Mailing Address: Registration Section Street Address: Registration Section	
Division of Corporations Division of Corporations Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZAT	TION PRESE
OF	SECRETARY OF STATE DIVISION OF CORPORATIONS

AAPP,	116		22 APR 25 PM	3: 1 9
(Name of the Limi	ted Liability Comp	ny as it now appears (Liability Company)		
The Articles of Organization for this Limited L	iability Company			and assigned
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here	:	
The new name must be distinguishable and contain the	words "Limited Liab	• •	=	
Enter new principal offices address, if applic	cable:	4260	49 th ST	- N. FL 33709
(Principal office address MUST BE A STREI	ET ADDRESS)	ST. PETE	RSBURG, 1	FL 33709
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> BOX)</u>	13799 SEMINOC	PARK BO E, PL 3	LVD. #117
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our rec	ords, <u>enter the nan</u>	ne of the new registe
Name of New Registered Agent:	41	VTHONY P G PARK Enter Florida	EYINGHAO	Ur .
New Registered Office Address:	1379	9 PARK	BLUP. #	-117
	SEMI	Enter Florida N/OF	i street address	33776 Zip Code
	JEMU	, 400	Florida	11/1/10

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
MBR	ALESHA PEYINGHAUS	4300 BIRCH ST. NE ST. PETE, PL 33703	□Add
			DRcmove
		1121 - 119 th C1	□Change
MBR	ANTHONY PEYINGHAUS	4260 49 th ST. N. ST. PETERSBURG, FL 33709	Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ffectiv an effe	ve date, if other than the date of filing:
ote:	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
Jeanne	in a creenive date on the Department of State a records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filo	ed. Arais 9
ated _	4/4/2022 , 2022.
aicu _	, 0,10
	Signature of a member or authorized representative of a member
	HLESHA PEYINGHAUS Typed or printed name of signee

Filing Fee: \$25.00