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A. RIVERS MAY - 6 2023

COVER LETTER

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TO:

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end ie 🗠	. ANNA	MARIA	Chain	or MO SI	DLES , LL(
SUBJECT	i. <u></u>		Name of Limi	ited Liability Comp	any	
The enclos	sed Articles of	Amendment an	d fee(s) are sub	mitted for filing.		
Please reti	ım all corresp	ondence concert	ning this matter	to the following:		
			JUSON	√L, ≤	: UZOR	
				Name of Per	rson	
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For further	r information	concerning this	matter, please c.		,	
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f		the following ar	nount:			
⊠ \$25.0	00 Filing Fee		Filing Fee & cate of Status	□ \$55.00 Fili Certified ((additional o	_	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addr Registratior Division of P.O. Box 63 Tallahassec	Section Corporations 327]]	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro	porations
				•	Tallahassee, FL	. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DNNA MARIA CHARTEY & SALES, LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
orida document number
is amendment is submitted to amend the following:
If amending name, enter the new name of the limited liability company here:
e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.1.C."
nter new principal offices address, if applicable:
rincipal office address MUST BE A STREET ADDRESS)
nter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address Second Sec

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.

Cirv

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
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		HOLMES BEACH, FL 347	7 □Remove
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