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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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Amending our Articles of Organization for LAUGH DEALER LLC

March 25, 2024

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Registration Section,

Please find our attached articles of amendment to a new name: LAUGH DEALERS LLC.

All the best,

Charlie Nadler & Kiar Holland

Char Mal

8981 NW 13th Street Plantation, FL 33322 310,494.6268 charlie@laughdealers.com

| TO: Registration Division of | r Section Corporations | | | | |
|---|---|---|---|--|--|
| Laugh Dealer LLC | | | | | |
| SUBJECT: Name of Limited Liability Company | | | | | |
| The enclosed Articles | of Amendment and fee(s) are sub | omitted for filing. | | | |
| Please return all corre | espondence concerning this matter | to the following: | | | |
| | Kiar Holland | | | | |
| | | Name of Person | | | |
| | Laugh Dealer LLC | | | | |
| Firm/Company | | | | | |
| | 8981 NW 13th Street | | | | |
| | | Address | | | |
| | Plantation, FL 33322 | | | | |
| | 19.5.5.19.219. | City/State and Zip Code | | | |
| | eharlie@laughdealers.com | | | | |
| | E-mail address: (| to be used for future annual report notifica- | ation) | | |
| For further information | on concerning this matter, please c | all: | | | |
| Charlie Nadler | | 310 494-6268 | | | |
| Nau | ne of Person | at () Area Code Daytime T | elephone Number | | |
| Enclosed is a check for | or the following amount: | | | | |
| ■ \$25.00 Filing Fee | S30,00 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) | | |
| Mailing Address: | | <u>Street Address:</u> Registration Secti | on | | |
| Registration Section Division of Corporations | | - | Division of Corporations | | |
| P.O. Box 6327 | | The Centre of Tallahassee | | | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | | | |

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION OF

| Laugh Dealer LLC | | | |
|---|---|---|---------------------------------|
| (Name of the Lim | ited Liability Comp (A Florida Limited | any as it now appears on our record Liability Company) | <u>ds.</u>) |
| he Articles of Organization for this Limited | Liability Compan | y were filed on March 12, 2018 | and assigned |
| orida document number L18000063222 | · | | |
| is amendment is submitted to amend the fo | llowing: | | |
| If amending name, enter the new name | of the limited lia | bility company here: | |
| augh Dealers LLC | | | |
| e new name must be distinguishable and contain the | words "Limited Liab | oility Company," the designation "LLC | C" or the abbreviation "L.L.C." |
| nter new principal offices address, if appl | icable: | N'A | |
| rincipal office address MUST BE A STRE | ET ADDRESS) | | |
| | | <u> </u> | 7 |
| | | | =0 =0 =0 . |
| iter new mailing address, if applicable: | | N/A | |
| Mailing address MAY BE A POST OFFICE BOX) | | | |
| | <u></u> | | |
| | | | |
| If amending the registered agent and/or ent and/or the new registered office addr | | address on our records, enter | the name of the new registe |
| Name of New Registered Agent: | N A | | |
| New Registered Office Address: | N A | | |
| | <u></u> | Enter Florida street addre | 388 |
| | | F | lorida |
| | | 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.

| | | | • | |
|------|------|---|---|--|
| | | | • | |
| | | J | | |

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-------------|--------------|----------------|
| | | N.A | □Add |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated March 26 Charlie Nadler

Typed or printed name of signee