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PICK-UP	WAIT	MAIL
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Special Instructions to	Filing Officer:	

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Y. SCOTT FEB - 1 2022

COVER LETTER

TO: Registration Set Division of Cor				
SUBJECT: AW		Stment LLC ited Liability Company		
	Amendment and fee(s) are sub	<u> </u>		
	Harry	ASSOULING Name of Person		
	AWHET	Firm/Company	LLC TORRE	Z022 JA
	2858 N (Driversity Dr	NHASSE	JAN 24 PM
	Coral Spri	ings FL 330U	5 FEE	PH 3: 03
	Christeen (to be used for future annual report notif	ication)	
For further information co	oncerning this matter, please ca	•		
Christeer Name of	LOAD Person	at (<u>754</u>) <u>223</u> - Area Code Daytime	Q \ Q \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-
Enclosed is a check for the	ne following amount:			
☐ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fe Certificate of St Certified Copy (additional copy is o	tatus &
Mailing Address Registration S		Street Address: Registration Sec	ction	

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

. . ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Y Company as it now appears on Limited Liability Company)	Our records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 3	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the design	
Enter new principal offices address, if applicable:		2022 SEC TA
(Principal office address MUST BE A STREET ADDR	ESS)	THE AR TH
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PH 3: 03
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our reco	rds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	street address
		Florida
	Ciņ	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	Harry Assoviine	2858 N University D	<u>√</u> √Add
		2858 N University D Coral Springs PL 33065	□Remove
		33065	□Change
			□Add
		SECRETAL ALLAN	Remove ZDD Remove Change Add 3: 03
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an effective date is list ote: If the date inse	her than the date of ted, the date must be specified in this block does date on the Departmen	ic and cannot be prior not meet the applica	to date of filing or more	e than 90 days afte	ional) r tiling.): is date w	Pursuant vill not l	: to 605.020 be listed a
		it not an effective tir	me, at 12:01 a.m. on	the earlier of: (b	o) The	90 th d a	y after the
	elayed effective date, bu						
record specifies a delais filed.	$\overline{\mathcal{A}}$		rized representative of				