118000070722

(R	Requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(B	Business Entity Name)	
(D	Occument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

Office Use Only



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Y. SCOTT APR 2 3 2022

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: I am Unic	Name of Limited Liability Company	
The enclosed Articles of Amendment and	fee(s) are submitted for filing.	
Please return all correspondence concerni	ng this matter to the following:	
7741 Apoll Kaayl	Name of Person Marketone Milestone Address Death FL 33572 City/State and Zip Code On Collections @ Amail. Com (all lover committed address: (to be used for future annual report notification)	יו ני
For further information concerning this m		
Kyla armstrong Name of Person	at (<u>\$13</u>) <u>647-520 Y</u> Area Code Daytime Telephone Number	
Enclosed is a check for the following amount of the fo		
Mailing Address: Registration Section Division of Corporations	Street Address: 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

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on $\frac{U/28/27}{L+800070722}$ and assigned
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name plust be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: 7242 Milestone dv
(Principal office address MUST BE A STREET ADDRESS) Apollo Beuch Fl 33572
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) POUL Beach FL 33572
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here:
Name of New Registered Agent: Kully Armstray
New Registered Office Address: 7242 Milestine OV 75 8 Enter Florida street address
Apollo Beach, Florida B3572 Zip Code
New Registered Agent's Signature, if changing Registered Agent

New Registered Agent's Signature, if changing Registered Agent:

I am unique UC

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 as or removed from our records:				
MGR = A $AMRR = A$	lanager Authorized Member		/	
<u>Fitle</u>	<u>Name</u>	Address	Type of Action	
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			Remove	
				
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-	I am changing the name from I am unique LC
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l' Mastin	re date, if other than the date of filing: (optional)
lf an effec Note: I	the date, if other than the date of filing:
e record d is file	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 d.
Dated _	,
	Signature of a member or authorized representative of a member