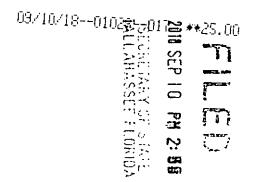
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# **COVER LETTER**

TO: Registration S Division of Co SUBJECT:	ncleu L	Daniel [[Company]		
The enclosed Articles of	「Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Andrew	Chobrial. Name of Person	<del></del>	
	Andrew ?	G. Saniel Sim/Company	LLC	
	2211 Kend	all Springs C	f. Apl. 202	
	Branclor	n F1- 335	10	
	andy.		Com	
For further information of	concerning this matter, please c	·		<b>-</b> Y
Andrew	Chobrial of Person	at ( <u>777)</u> 666	Telephone Number	77)
Enclosed is a check for t	the following amount:		# 2: 86 1.0810A	CONTRACT OF THE PARTY OF THE PA
\$25,00 Filing Fee	☐ \$30.00 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:

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

## STREET/COURIER ADDRESS:

۹,

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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 \_ Florida document number <u>L</u> 18000164 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 must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

### 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

Florida

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being adde</u> or removed from our records:

MGR = Ma AMBR = Au	nnager ithorized Member		
<u>Title</u>	Name 4	Address	Type of Action
MGR	Andrew Chobrial	2211 Kendall Springs.	B Add
		2211 Kendell Springs. Ct. Apt. 202 Bran	or □ Remove
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			□ Remove
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Page 3 of 3

Filing Fee: \$25.00