## (18000176459

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

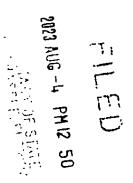
Office Use Only



800413160868

LLC N/c & Amend

08/04/23--01023--012 \*\*25.00



A. RAMSEY AUG 2 g 2023

## **COVER LETTER**

TO:

Registration Section

Division of C	orporations					
Janet Cas	so, LLC					
Name of Limited Liability Company						
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.				
Please return all corres	pondence concerning this matter	to the following:				
	Scott DiSalvo, CPA					
	Name of Person					
	DiSalvo & Associates, PLLC					
	Firm/Company					
	1760 N. Jog Road, Suite 150					
	Address					
	West Palm Beach, FL 33411					
		City/State and Zip Code				
	sdisalvo@d-acpa.com					
	E-mail address: (	to be used for future annual report noti-	fication)			
For further information	n concerning this matter, please c	all:				
Scott DiSalvo, CPA		561 659-1177 at ( )				
Nam	e of Person		e Telephone Number			
Enclosed is a check fo	r the following amount:					
\$25.00 Filing Fcc	☐ \$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 Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Tallahassee e Street, Suite 810			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

2023 AUG -4 PM 12 50

Janet Caso, LLC

(Name of the Limited Liability Company as it now appears on our records.).

(A Florida Limited Liability Company)

	Liability Company were filed on [	and assigned
Florida document number L18000176459		
This amendment is submitted to amend the fo	flowing:	
A. If amending name, enter the new name	of the limited liability company	here:
Janet Lee Kramer, LLC		
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	CET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE		
Matung address MAT BE A FOST OFFICE	<u></u>	
B. If amending the registered agent and/or	registered office address on our	records, enter the name of the new register
		records, enter the name of the new register
		records, enter the name of the new register
		records, enter the name of the new register
Name of New Registered Agent:	ess here:	records, enter the name of the new register
agent and/or the new registered office addr	Janet Lee Kramer 4100 Taft Street	records, enter the name of the new register
	Janet Lee Kramer 4100 Taft Street	

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 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>	Name	Address	Type of Action
AMBR	Janet Caso	4100 Taft Street	□Add
		Hollywood, FL 33021	■Remove
			Change
AMBR	Janet Lee Kramer	4100 Taft Street	⊟Add
		Hollywood, FL 33021	□ Remove
			☐ Change
			□ Add
			□ Remove
			□Change
	·		□Add
			□Remove
			☐ Change
			□Add
			🗀 Remove
			Change
			□Add
			☐ Remove
			[]Change