## L18000288257

(R	(equestor's Name)	
(A	ddress)	
	(ddress)	<u> </u>
(0	duiess)	
(C	city/State/Zip/Phone #)	
_		
PICK-UP	☐ WAIT	MAIL
	usiness Entity Name)	
(5	domesa Emily Hame,	
		-····
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	





800416425648

10/02/23--01021--021 \*\*25.00



## **COVER LETTER**

TO: Registration Section

Div	ision of Corp	porations			•
	DEVINE PI	ROSPERITY LLC		,	
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	d Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		DANIEL DIEUDONNE			
			Name of Person		
		DEVINE PROSPERITY I	LC		
			Firm/Company		
		11854 NW 13TH ST		ა ლე	2023
			Address	AL.	000
		PEMBROKE PINES, FL	33026	변동 구요	2023 OCT -2
		4-3	City/State and Zip Code	# # # # # # # # # # # # # # # # # # #	PH 2: 44
		devineprosperityinv@gmail	to be used for future annual report	notification) -5.7	Ŀ
For further i	nformation co	oncerning this matter, please ca	-	(3)	
DANIEL D	IEUDONNE		305 467-528	5	
	Name of	Person		ytime Telephone Number	_
Enclosed is	a check for th	ne following amount:			
<b>\$25.00</b>	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of S Certified Copy (additional copy i	Status &
	iling Addres gistration S		Street Addres Registration		
	-	orporations	<del>-</del>	Corporations	
P.0	O. Box 632	7	The Centre	of Tallahassee	
Ta	llahassee, I	L 32314	2415 N. Mo	nroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DEVINE PROSPERITY INVESTMENTS LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L18000288257}{L18000288257}$ .	were filed on 12/17/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company" the designation "H C" or the abbrevi	ation "L.L.C."
-	261 N University DrSuite 500 PMB 1024	
Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)	Plantation, FL 33324	
Enter new mailing address, if applicable:	261 N University DrSuite 500 PMB 1024	2023
Mailing address MAY BE A POST OFFICE BOX)	Plantation, FL 33324	8
		N
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of	the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street 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.

Civ

If Changing Registered Agent, Signature of New Registered Agent

Florida

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 =	Ma	ana	ger	
				1

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			Remove
			☐ Change
		<del> </del>	□∧dd
			□ Remove
			Change  SEC 23  TARE GLAdd
			Remove
			☐ ☐ Add
			□ Remove
	<del></del>	<del></del>	□Add
			□Remove
			[]Change
	<del></del>		□Adđ
			□Remove
			□Change

						_
<del></del>		<del></del> -	<u> </u>			
						_
				. <u></u> .		
						_
	· · · · · · · · · · · · · · · · · · ·	<del></del>			3ECF TAL	<del></del>
			<u> </u>		≃_ ♀	— ~ ~ ~
				<del></del>	TARY S	
					- 3 - <u> 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3</u>	
<del></del>					11 to 12 to	
			·		· · · · · · · · · · · · · · · · · · ·	
						<del>_</del>
Effective date, if other if an effective date is listed, the Note: If the date inserted document's effective date	the date must be specific a d in this block does not	ind cannot be prior to timeet the applicab			ling.) Pursuant to (	
e record specifies a delayed is filed.	ed effective date, but n	ot an effective time	e, at 12:01 a.m. on th	e earlier of: (b)	The 90th day a	fter the
Dated 09/25/		<u>, 2023</u>	··			
	4 0	<i>[</i> ] .				
	Signature of	a member or authori	zed representative of a	member		