L19000010939

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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VISION OF CORPORATIONS

VECETÁRD

COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT:Ta	Name of Limite	ed Liability Company	
	Amendment and fee(s) are submindence concerning this matter to		
	dara Dorse	Name of Person	
		Firm/Company	
	2328 Apakaci	nee Phy Ste 8	
	Tallahassee, F	City/State and Zip Code	
		25mg/1. (com be used for future annual report noti	
For further information c	oncerning this matter, please call	l:	
Idora Dor Name o	्रभ् f Person	at (<u>786</u>) <u>365 - 8</u> Area Code Daytim	49 g e Telephone Number
Enclosed is a check for th	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 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 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 Compa (A Florida Limited I	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19020018939</u>	were filed on January 9, 2	019 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or t	ne abbreviation "L.1C."
Enter new principal offices address, if applicable:	2328 Apalectro Promi Tallataisee Fi 32301	1 Str 8
(Principal office address MUST BE A STREET ADDRESS)	Tallytaisee Fi 32301	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2328 Apaigchee Phuy Tanchagee, Fl 32301	Ste 8
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	City	zip code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office	performance of my duties, and Lorovided for in Chapter 605, F.S.	m familiar with and Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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	Frederick Davis	2121 SW 69th Dr Gainesv. Ne FL,	37607 ¥ Add
			□Remove
			🗆 Change
			🗆 Add
			□Remove
			□ Change
			🗆 Add
			□Remove
		·	□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

		
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(If an effective Note: If th	date, if other than the date of filing: (optional) reduce date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020 he date inserted in this block does not meet the applicable statutory filing requirements, this date wil! not be listed as a effective date on the Department of State's records.	
the record speciord is filed.	secifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	<u>:</u>
Dated	May 18 . 2022. Signature of a member or authorized representative of a member	
_	Tdury Drsey Typed or printed name of signee	

THE PARAM