# 1190000 24757

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

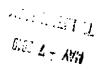
Office Use Only



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### **COVER LETTER**

	ration Section n of Corporations			
SUBJECT:	FLORIDA	EXCLUSIVE Name of Limit	Classifity Company	
The enclosed Ar	ticles of Amendment	and fee(s) are subm	nitted for filing.	
Please return all	correspondence conc	erning this matter to	o the following:	
		Ammau	Name of Person	<del>-</del>
		Abou	Eirm/Company	
		9000	) New ON eaws	, ct.
	<del>.</del>	<u>Orlan</u>	City/State and Zip Code	
		E-mail address: (to	wassubject too	gravity @ gma,
For further infor	mation concerning this		•	•
<u> </u>	Name of Person		at $(321)$ Area Code Dayti	- 583 O me Telephone Number
Enclosed is a che	eck for the following a	imount:		
S25.00 Filing	g Fee	Filing Fee & icate 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:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabil	tity Company as it now appears on our reports 1927 (1)
	Company were filed on 01 PART MANGE Plant Assigned  24757  SCHOOL MANGE FOR EARLY MANGE PARTY PARTY MANGE PARTY MANGE PARTY MANGE PARTY MANGE PARTY MANGE PARTY PARTY MANGE PARTY PARTY MANGE PARTY MANGE PARTY MANGE PARTY MANGE PARTY PARTY MANGE PARTY PA
	mted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADD	20.
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	Same as about
registered agent and/or the new registered office add	
Name of New Registered Agent:	Same
New Registered Office Address:	Enter Florida street address , Florida
	City Zıp Code

#### 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.

f 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MAR	Shauni Siu	5764 N. Orango Blosson Trai	l_□ Add
	Shauni Siu a.K.a Rodan tanoustos Auto	5764 N. Orango Blosson Train #122 Orlando FL 32810	Remove
			Change
			🗆 Add
			□ Remove
			□ Change
			□ Add
		7	□ Remove
			Change
			□ Add
			_□ Remove
			_□ Change
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			_□ Add
			_□ Remove
			_□ Change

	ding any other information, enter change(s) here: (Anach additional sheets, if necessary.)  Shauni Siu aka Para ARW
-	withdraws from FURIDA EXCLUSIN REALLY as MER.
	She is no langer any action broker
	When the state Files, she will be dissassociat
	000000 1000000000000000000000000000000
_	•
_	
	date, if other than the date of filing:
Tective an effect	e date, if other than the date of filing:
<u>ote:</u> If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t's effective date on the Department of State's records.
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
The 9	Oth day after the record is filed.
ited	<b>Δ</b> Λ
	Mari di li li li
	Signature of a member or authorized representative of a member
	Signiture of a member or authorized representative of a member  ANN W World'S
	المالية المالي

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Filing Fee: \$25.00