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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070

Phone : (888)462-3453 Fax Number : (877)919-2613

\*\*Enter the email address for this business entity to be used for future spannual report mailings. Enter only one email address please.\*\*

현년 도운mail Address:\_\_ efile1234@incfile.com

💆 LLC AMND/RESTATE/CORRECT OR M/MG RESIGN I AM THAT I AM-ROYAL PRIESTHOOD LLC

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K. SALY

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## **COVER LETTER**

TO: Registration Division of C	Section Corporations		(((H2500001814
cup incr.		ROYAL PRIESTHOOD LLC	
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filling.	
Please return all corre	spondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	
		Address	
	HOUSTON. TX 77064	City/State and Zip Code	
	efile1234@inefile.com	·	
For further informatio	E-mail address: on concerning this matter, please of	(to be used for future annual report not) all:	Meation)
LOVETTE DOBSON		1 (888) 462-34 at () Area Code Daytime	53
Nam	e of Person	Area Code Daytim	e Telephone Number
Enclosed is a check fo	r the 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 Add Registratio		Street Address: Registration Sec	ction
Division of	`Corporations	Division of Cor	porations
P.O. Box 6 Tallahassee	327 e, FL 32314	The Centre of T 2415 N. Monroe	allahassee e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H25000018143 3)))

LAM THAT LAM	-ROYAL PRIESTHOOD LLC	The same
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)	assigned
	01/01/2010	
The Articles of Organization for this Limited Liability Cor	npany were filed on 64/01/2019 and	àssigned
Florida document number L19000088096	,	(4)
This amendment is submitted to amend the following:		<b>19</b>
A. If amending name, enter the new name of the limite	d liability company here:	
VALENTIN CIRINO JR. LLC		
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE.	SS)	
Enter new mailing address, if applicable:	924 N Magnolia Avenue Suite 202 Pmb 1021	
	Orlando, FL, 32803	
(Mailing address MAY BE A POST OFFICE BOX)	Oriando, 1 & 1,00000	
(Mailing address MAY BE A POST OFFICE BOX)	Oranio, F. C. (2002)	
(Mailing address MAY BE A POST OFFICE BOX)	Oranio, 1 C., 7 Cox.	
B. If amending the registered agent and/or registered o		new regist
B. If amending the registered agent and/or registered o		new regist
B. If amending the registered agent and/or registered on agent and/or the new registered office address here:		new regist
B. If amending the registered agent and/or registered o		new regist
B. If amending the registered agent and/or registered on agent and/or the new registered office address here:	office address on our records, enter the name of the	new regist
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:	office address on our records, enter the name of the second secon	new regist
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:	office address on our records, enter the name of the	

Thereby 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

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1/16/2025 13:29:16 CST Page: 4/5

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Diana Torres	924 N MAGNOLIA AVENUE SUITE 202 PMB 102	I □Add
		ORLANDO, FL 32803	BRemove
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cord specifies a delayed et	fective date, but	not an effective (	time, at 12:01 a.	m. on the earlier o	of: (b) The 90th	day after th
s filed.						
JANUARY 15	•	. 2025	`			
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	Signature o	John Strain	M LTU	nve of a member		

Filing Fee: \$25.00