L19000114790

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HAY 28 TOTAL TOTAL

COVER LETTER

ΓΟ: Registratio Division of	on Section Corporations		
SUBJECT:	Desire Motivates Determina	tion	
oobject.	Name of Lir	mited Liability Company	
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.	
Please return all corr	respondence concerning this matte	r to the following:	
		Beverly Hosley	
		Name of Person	
		Desire Motivates Determination	
		Firm/Company	
		2788 Dorson Way	
		Address	
		Delray Beach, FL 33445	
		City/State and Zip Code	
	V mail addrage	bhosley13@gmail.com (to be used for future annual report notifi	ication
For further informati	ion concerning this matter, please	•	(Catton)
Beverly Hos	sley		3721
N'a	ame of Person	Area Code Daytime	Telephone Number
Enclosed is a check	for the following amount:		
\$25.00 Filing Fe	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	(

MAILING ADDRESS:

TO:

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

FILED

Desire Motivate	les Determination
(Name of the Limited Liabil	lity Company as it now appears on our records.) la Limited Liability Company)
(A Fiolid	2019 HAY 10 A 4 27
The Articles of Organization for this Limited Liability (Company were filed on April 26, 2019 cand assigned
Florida document number L19000114790	Company were filed on April 26, 2019 [ALLAMASSEE, ILDAWA.
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	aited liability company here:
The new name must be distinguishable and contain the words "Lir	mited 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	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regi	istered office address on our records, enter the name of the
registered agent and/or the new registered office add	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Emer Farian sweet and C55
	, Florida
	City Zip 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.

If 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
MGR	Jayron T Hosley	2788 Dorson Way Delray Beach. FL 33445	□ Add
			■ Remove
			Change
PRES	Jeremy M Hosley	2788 Dorson Way Delray Beach, FL 33445	□ Add
			Remove
			Change
AMBR	Beverly A Hosley	2788 Dorson Way Delray Beach, FL 33445	
			Remove
			□ Change
			□ Add
			□ Remove
			Change
			
		Remov	□ Remove
			☐ Change
			Add
			□ Remove
			Change

•	
(If an ef <u>Note:</u>	feetive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	Buerles a Raoles
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00