Division of Corporations

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(((H23000404295 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone : (407)841-1200

Fax Number : (407)423-1831

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

Email Address: Dave.ROLLINS@3ds.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DADEJEKA, LLC.

Certificate of Status	0
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Help

From: Leslie Perryman

,Fax: 14072329822

To:

Fax: (850) 617-6383

Page: 2 of 4

11/27/2023 8:46 AM

ARTICLES OF AMENDMENT TO (((H23000404295 3))) ARTICLES OF ORGANIZATION OF

DADEJEKA, LLC		
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000140246</u> .	were filed on June 3, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		:
		<u> </u>
Enter new mailing address, if applicable:		 -\2
Mailing address MAY BE A POST OFFICE BOX)		···
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records. <u>enter the</u>	name of the new register
New Registered Office Address:		
	Enter Florida street address	
	Florid	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as parties being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and l rovided for in Chapter 605, F.S	am familiar with and . Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

From: Leslie Perryman	Fax: 14072329822	To:	Fax: (850) 617-6383	Page: 3 of 4	11/27/2023 8:46 A

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

(((H23000404295 3)))

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
			Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□ Remove
			Change
			□Add
			□Remove
			□Change
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	(((H23000404295 3)))		Change

To:

(((H23000404295 3)))

the Com	pany shall be a	manager-ma	naged compa					
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