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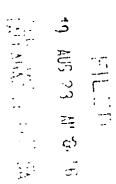
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SEP 0 6 2019 S. YOUNG

COVER LETTER

TO: Registration Section
SUBJECT: Andrea Duyer LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Andrea Duyer Name of Person
Andrea Durler LLC Firm/Company
36 re 2nd Ave Deer Field Beach
Derfield Beach, FL 33441 City/State and Zip Code
E-mail alidress: (to be used for fitture annual report notification)
For further information concerning this matter, please call:
Andrea Duyer at (609) 351 6933 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$\Bigcup \\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

۹,

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 Liability C (A Florida Li	Company as it now appears omited Liability Company)	on our records.)	,
The Articles of Organization for this Limited Liability Conficing document number <u>L1 9000 14 5887</u>	npany were filed on <u>5</u>	31/2019	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company," the des	ignation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE.	<u>SS)</u>		3
			· <u></u>
		÷	
Enter new mailing address, if applicable:			್ತು <u>i :</u>
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
		-	.,
B. If amending the registered agent and/or registered agent and/or the new registered office address		our records, <u>enter th</u>	ne name of the no
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	la street address	
		Florida	
	City		Zip Code
Now Registered Agent's Signature if changing Registered &	\aont.		

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 adc or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Andrea Duyer	36 ne 2nd Ave Deerfie	Id B C Add
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(If an effective Note: If the	te, if other than the date is listed, the date mu date inserted in this be effective date on the D	st be specific and ca lock does not me	innot be prior to date at the applicable st	of filing or more than atutory filing requir	(optional) 90 days after filing.) Perments, this date wi	tursuant to 605,020 ill not be listed as
ha racard	specifies a delaye day after the rec		te, but not an	effective time, a	at 12:01 a.m. or	n the earlier o
The 90th			·			
The 90th	anche Andre	Signature of a me	mber or authorized	representative of a me	mber	

Page 3 of 3

Filing Fee: \$25.00