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## **COVER LETTER**

TO: Registration Section
Division of Corporations

ALTMAN. SUBJECT:	, FRIEDBERG, & WOLFMAN	N PLLC		
Sobject.	Name of Lim	ited Liability Company		2023
	Amendment and fee(s) are sub ondence concerning this matter	- -		2023 JUL 26 AH I
	Eric Tuan			4H 10: 146
	· · · · · · · · ·	Name of Person		_
	Altman, Tuan, & Friedber	g PLLC		
		Firm/Company		_
	1880 N Congress Ave Sui	te 307		
		Address		_
	Boynton Beach, FL 33420	5		
		City/State and Zip Code		_
	etuan@atfcpas.com  E-mail address: (	to be used for future annual report notif	fication)	
For further information c	oncerning this matter, please c	all:		
Eric Tuan		561 7335300 at ()		
Name o	f Person	Area Code Daytime	e Telephone Numbe	2r
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AN PLLC		<b>≥</b> 1
iability Company Iorida Limited Lia	as it now appears on our records.) bility Company)	<u> </u>
ity Company w	vere filed on 9/18/2019	ති and assigned
ng:		
limited liabili	ty company here:	
"Limited Liability	Company," the designation "LLC" or the	abbreviation "L.L.C."
<b>::</b> .		
DDRESS)	*	<del>.</del>
<u>Y)</u> .		
	<del> </del>	<del></del>
tered office ade ere:	dress on our records, <u>enter the na</u>	ume of the new registere
	Enter Florida street address	
	, Florida	
	iability Company lorida Limited Lia ity Company w	iability Company as it now appears on our records.) lorida Limited Liability Company)  ity Company were filed on 9/18/2019  g: limited liability company here:  "Limited Liability Company," the designation "LLC" or the company here:  DDRESS)  tered office address on our records, enter the name:  Enter Florida street address

## 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.

Ciry

Zip Code

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
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effective date is listed, the date me: If the date inserted in this		(optional) or more than 90 days after filing.) Pursuant to 605.020 iling requirements, this date will not be listed a
cord specifies a delayed effect filed.	ive date, but not an effective time, at 12:01 a.	m, on the earlier of: (b) The 90th day after th
ed	2023	
:0	ı N	
- Can	Signature of a member or authorized representa	