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SECRETARY OF STATE
TALLAHASSEF FA

COVER LETTER

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Registration Section

Division of Cor	•				
	de Bienvenu, LLC Joo	anie Nicole Bienvi	enu, LLC		
SUBJECT:	Name of Lim	ited Liability Company			
The employed Agriphic of	Amendment and fee(s) are sub	mittad for filing			
dease return all correspo	ondence concerning this matter	to the following:			
	Nicole Parker				
		Name of Person			
	Juane Nicole Bienvenu, Ll	Joanie Nicole	Bienvenu, 1	uc	
		Firm/Company			
	153 Cypress Drive				
		Address	•		
	Santa Rosa Beach, FL 324	59		35	20
		City/State and Zip Code		7A. S.	2024 NOV 18
	joanienicoleparker@gmail.c		-	NA THE	۷0
		to be used for future annual report notif	ication)	CRETARY OF STATE FALLAHASSEE, FL	8
or further information c	concerning this matter, please co	all:		음음	i
Nicole Parker		985 237-4688		EL	9: 36
Name o	of Person	Area Code Daytime	Telephone Number	—-' <u> </u>	65
Enclosed is a check for t	he 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 Address Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	oorations allahassee Street, Suite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{09/30/2019}{1}$ and assigned Florida document number <u>1.1900024</u>5697 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Joanie Nicole Parker, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cirv

New Registered Agent's Signature, if changing Registered Agent:

Joanie Nicole Bienvenu, LLC

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, <u>enter the title, name, and address of each person</u> <u>being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			SECRETARY OF STATE
			☐ Remove
			Change
			□Remove
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	TATE OF TAKEN	9: 36
E. Effective date, if other than the date of		
(If an effective date is listed, the date must be speci	rific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 is not meet the applicable statutory filing requirements, this date will not be list	5.0207 (3)(b) ted as the
If the record specifies a delayed effective date, be record is filed.	out not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte	er the
Dated November 14,202	24.	
	24. Will Palle re of a member or authorized representative of a member	
Joanie Nicole Parker	•	
	Typed or printed name of signee	