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Special Instructions to	Filing Officer:	

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22 MAY 13 AM ID: 1.3

T. MATTHEWS
JUL 12 2022

COVER LETTER

Division of Cor			7
The Merila	n LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Manishea Merilan		
		Name of Person	
	The Merilan LLC		
		Firm/Company	
	6141 Westwood Blvd		
		Address	
	Orlando, FL 32821		
		City/State and Zip Code	
	manishea,merilan@gmail.c	om to be used for future annual r	coort notification)
For further information of	concerning this matter, please c		•
Manishea Merilan		407 924	.6513
Name o	of Person	Area Code	Daytime Telephone Number
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)	Certificate of Status &
<u>Mailing Addre</u> Registration	Section		tion Section
Division of Corporations		Division	of Corporations

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATIONS OF CORPORATION OF 22 MAY 13 AM 10: 43

The Merilan LLC (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 $\frac{11/22/2019}{2}$ _____ and assigned Florida document number L19000289997 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 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 _____. Florida ____

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR Manishea Merilan	12103 Cypress Landing Ave	□Add	
	Clermont, FL 34711	□Remove	
			■ Change
AMBR	Manishea Merilan	12103 Cypress Landing Ave	
		Clermont, FL 34711	□Remove
			□Change
MGR	Chadrack Merilan	12103 Cypress Landing Ave	
		Clermont, FL 34711	□Remove
			Change
AMBR	Chadrack Merilan	12103 Cypress Landing Ave	≣Add
		Clermont, FL 34711	DRemove
			Change
		🗆 🗅 Add	
			□Remove
			□Change
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			□Remove
		[]Change	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ford is filed. Dated May 9th 2022 Signature of a member or authorized representative of a member	Effective date, if other than the date of filing:			
Effective date, if other than the date of filing:	Effective date, if other than the date of filing:		<u> </u>	
Effective date, if other than the date of filing:	Effective date, if other than the date of filing:			
Effective date, if other than the date of filing: ((optional)) ((fran effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated May 9th 2022 Signature of a member or authorized representance of a member	Effective date, if other than the date of filing: (Optional) (If an effective date, if sixed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated May 9th 2022 Signature of a member or authorized representative of a member			
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Filing Fee: \$25.00