L19 000299439

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COVER LETTER

TO: Registration Sec Division of Corp			
('.	y Carter LLC	1	1
SUBJECT:	Y CANTO LLL	ited Liability Company	<u> </u>
	Name of Em	ned Elability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspoi	ndence concerning this matter	to the following:	
		oy Carter Jr.	
	(Name of Person Out (WHEV LL()	
	^	Firm/Company	
	2910	Colst St W	
	_	Address	
	Brodento	City/State and Zip Code	
		City/State and Zip Code	
	E-mailaddress: (ter 64 Comail. Co	NM tification)
For further information co	oncerning this matter, please co		
Λ a		••••	
(oy (aver Jr.	at (941) 600 G	6878
Narbe of	Person	Area Code Daytir	ne Telephone Number
Englosed is a check for th	e 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 4 ddmsg		Street Address	

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

Coy Carker L	LC	
(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on ou nited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Com Florida document number <u>41900299439</u> .	pany were filed on	912019 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited Oy (ar tr) h LLC The new name must be distinguishable and contain the words "Limited"		ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		202
(Principal office address MUST BE A STREET ADDRES	<u></u>	
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>		-6 PH 4: 53
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our record	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	vet address
		Florida
	City	Zip Code

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 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>	Name	Address	Type of Action
			□ Add
			□Remove
			Change
			□Add
			□Change
			202 □ Add All □ 6 □ Remove
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is filed. January 3rd 2021	
A WALL	n day after the
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Signature of a member or authorized representative of a member	 -