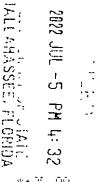
N19000306049

(Requestor's Name)	
(Address)	
,	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Serunda dopies Serundates or States	
Special Instructions to Filing Officer:	
	ļ

Office Use Only



100390421541



07/05/22--01021--011 **35.00

SEP 2 6 2022 S. PRATHER

COVER LETTER

Division of Corpo	orations		
SUBJECT:	A. C. VZEM Name of Lim	ODEIING & PLE ited Liability Company	DAJR L.L.C
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	MICHAET	COLUTO Name of Person	
	M.A.C.	ZEMODELTUG & 1	2EPASIE. LLC
	12341 S	W 35 ST Address	
		City/State and Zip Code	
	E-mail address: (1	OCOLOTO (CO) JAH to be used for future annual report notif	CO = COM leation)
For further information con	cerning this matter, please ca	all:	
MICHAET (Person	at (305) 345- Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address	

Mailing Address:

TO:

Registration Section

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

(Name of the Limited Liability	Company as it now appears on our records.)	2022 J
(A Florida	Limited Liability Company)	野 E J
The Articles of Organization for this Limited Liability Co	7 1	and assigned
Florida document number <u>L190030404</u>	1	PH 4:
This amendment is submitted to amend the following:		32 (10)
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street 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>	<u>Name</u>	Address	Type of Action
		□Remove	
		□Change	
			□Remove
			Change
			□Remove
			□ Change
		□Add	
			Change
			□Remove
	-		□ Change
		□Add	
			□ Remove
		□Chanve	

If amending any other information, enter change(s) here: (Attach additional sheets, if necessar	ury.)
	* * * * * * * * * * * * * * * * * * * *
	···
	
	<u>_</u> _
	· · · · · · · · · · · · · · · · · · ·
Effective date, if other than the date of filing:	ig.) Pursuant to 605.0207
he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) ord is filed.	The 90th day after the
Dated <u>JUNE 28</u> , 2022.	2022 JUL
Signature of a melober or authorized representative of a member	72. J.
MTCIVATI (ORUTO)	PA PA
Typed of printed name of signee	