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(Re	equestor's Name)	
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SUBJE	ЕСТ:	DEEZ	HANAGENEL	IT LLC ted Liability Company		
			Name of Lini	ted Enablity Company		
			ent and fee(s) are sub-	_		
			_	Name of Person		
		,	DEEZ MANAI	GEHENT (L)	<u> </u>	
			2461 SW	SOTH TERI Address	UCE	
			MIRAHAR/	FL 33025 City/State and Zip Code	<u> </u>	
			DEEZ AWA (E-mail address: ()	SETENTS (C) G) (A) to be used for future annual	TL, CM al report notification)	
For fur	ther informatio	n concerning	this matter, please ca	all:		
	FITZGER/ Nam	LO R.	JOSPH	at (<u>486</u>) Area Code	631 - 7071 Daytime Telepho	one Number
Enclose	ed is a check fo	or the followi	ng amount:			
5 \$2	5.00 Filing Fee		.00 Filing Fee & crtificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is e		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add	lress:		Street ,	Address:	

Registration Section
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 ORGANIZATION

OF 7020. 1 28 1112: 28

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(Name of the Limited Liability Company (A Florida Limited Lia	EN I LLC as it now appears on our records.)	
(A Florida Limited Lia	ibility Company)	
The Articles of Organization for this Limited Liability Company w	rere filed on <u>0800 JAWAA</u>	X 14 2020 and assigned
Florida document number <u>L 20000020890</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	v Company "the designation "1.1 C"	or the abbreviation "L.L.C."
	y company. The designation 1992 C	THE HOOF CHILDS TAILED
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 adagent and/or the new registered office address here:	dress on our records, <u>enter th</u>	e name of the new register
agent and/of the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flor	ida
	City	ida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree		
provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr		
being filed to merely reflect a change in the registered agent as pr		

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, 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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