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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration Se Division of Cor					
Eventoland	o, 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:			
	Tai Wah Rosanna Tran Ch	an			
		Name of Person			
	Eventolando, LLC.				
		Firm/Company	,	22 9	11 N N N N N N N N N N N N N N N N N N
	11136 Satellite Blvd.,			SEP 12	HAISTON OF CORPORATION
		Address			00
	Orlando, FL 32837			₽. 3	Kirûk
	 	City/State and Zip Code		မ္ မ	200
	Eventolando@gmail.com				
		to be used for future annual report notifi	cation)		
For further information c	oncerning this matter, please co	all:			
Tai Wah Rosanna Tran C	Chan	407 963-8889 at ()			
Name o	of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee Certificate of Sta Certified Copy tadditional copy is e	itus &	
<u>Mailing Addres</u> Registration (Street Address: Registration Sec	tion		
Division of C		Division of Corr			

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eventolando, LLC. (Name of the Limite)	d Liability Compar	ny as it now appears on our lability Company)	records.)		
(,	A Florida Limited L	nability Company)			
he Articles of Organization for this Limited Lia forida document number 1.20000061359	ability Company	were filed on2/24/20	20 a	nd assigr	ied
his amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
he new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designati	on "LLC" or the abbrevia	tion "L.L.G	
		5415 Lake Howell R			
Enter new principal offices address, if applications		#251		22	1216
<u> Principal office address MUST BE A STREE</u>	<u>T_ADDRESS)</u>	Winter Park Fl 32792		SEP	Ž.
		5415 Lake Howell R	nad .	- 12 F	DAKY (
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				— 	- 18 25
		#251 Winter Park Fl 32792		<u> </u>	5
		WHICH THE TIPE 72			
B. If amending the registered agent and/or ragent and/or the new registered office addre	<u>ss here</u> :		s, enter the name of	the new	<u>registo</u>
Name of New Registered Agent:	Mantin Qamar	r			
	5415 Lake H	bwell Road #251			
N D Com LOCK Addraget	Enter Florida street address				
New Registered Office Address:		Enter Florida sti	Et Han Con		
New Registered Office Address:	Winter Park	Enter Florida sti	Florida 32792		

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.

Mr. to

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
MGR	TRAN CHAN, TAI WAH R	11136 SATELLITE BLVD ORLANDO FL 32837	□Add
			■Remove
			□Change
MGR	MANTIN QAMAR	12472 Lake underhill Road #274 Orlando FL 32828	□ Add
	·		□Remove
			⊟ Change
			□Add
			Remove
			12 dd 3: Emore
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		······································	🗆 Add
			□Remove
			Change

Page 2 of 3

Signature of a member or authorized representative of a member TAI WAH ROSANNA TRAN CHAN			<u> </u>
Effective date, if other than the date of filing: ON/12/2022 (optional) Fan effective date is listed, 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 locument's effective date on the Department of State's records. The 90th day after the record is filed. Outed ON/14/2022 12.01AM Figurature of a member or authorized representative of a member			
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Page 3 of 3

Filing Fee: \$25.00