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## **COVER LETTER**

TO: Registration So Division of Co				
CLIBALICAL	erprises LLC			
SUBJECT:	Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub	_		
Please return all correspo	ondence concerning this matter	to the following:		
	David Heinze			
		Name of Person		
	Heinze Enterprises LLC			
		Firm/Company		
	18647 Lake Iola Rd			
		Address		
	Dade City, FL 33523			
	dheinze2014@gmail.com	City/State and Zip Code		
	E-mail address: (	to be used for future annual	report notification)	
For further information of	concerning this matter, please c	all:		
David Heinze			6-3838  Daytime Telephone Number	
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 end	Certificate Closed) Certified C	of Status &
<u>Mailing Addres</u> Registration		<u>Street A</u> Registr	ddress: ation Section	

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

FILED

2022 MAR 29 AM 7: 21 Heinze Enterprises LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) SECRETARY OF STATE TALLAHASSEF FL and assigned The Articles of Organization for this Limited Liability Company were filed on  $\frac{03/10/2020}{}$ Florida document number L20000077900 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 "LLC." 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 \_\_\_ City

## 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, 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 David Heinze	David Heinze	18647 Lake Iola Rd	
		Dade City, FL 33523	■Remove
		<del></del>	□Change
AMBR David Heinze	David Heinze	18647 Lake Iola Rd	■Add
		Dade City, FL 33523	□Remove
			□Change
			□Add
			□Remove
			□Change
		<del></del>	□Remove
		<del></del>	□Change
		<u></u>	□Add
		<del></del>	□Remove
			□Change
			□Add
			Remove
			□ Change

	nging from a "manager managed" to a "member managed"
-	
	03/01/2022
H <b>ecuve</b> an effecti	date, if other than the date of filing: (optional) ve 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
<u>ote:</u> If t	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocument	's effective date on the Department of State's records.
record sp l is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is incu.	
	15 M. 1 3000
ated	13 March . 2012.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	- /
	David Heinze
	Typed or printed name of signee

Filing Fee: \$25.00