L20000 175066

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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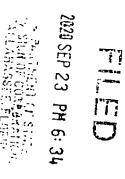




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OCT 3 0 2020 S. YOUNG



COVER LETTER

TO: Registration So Division of Co			
SUBJECT:	Dajuh Sawyer Name of Lim	FMerPrises LLC 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:	
	Daj	Uh Sairyer	
	Dainh San	Wyer Enterprises 11 Firm/Company	_C
	4115 315T Str.		
	St. Peters bu	V91FL 33712 City/State and Zip Code	
	Dasuhs 12 (E-mail address: (1)	V9 ₁ FL 33712 City/State and Zip Code Digmail. Com to be used for future annual report notice	fication)
For further information c	oncerning this matter, please ca	all:	
Daj Name o	uh Sawyer Person	at (<u>727</u>) <u>286</u> Area Code Daytime	o - 0056 e Telephone Number
Enclosed is a check for the	ne 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 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

E TI

Make It out Appare	LLC	· ·
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	See
The Articles of Organization for this Limited Liability Company	were filed on Tune 29,	2020 and aspuned
Florida document number <u>L20000 75066</u> .	•	¥ 2
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	LLC	
the new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7113 31ST Street	South
(Principal office address MUST BE A STREET ADDRESS)	St. Petershing, FL	33712
		<u></u> _
Enter new mailing address, if applicable:	PO Box 530133	
Mailing address MAY BE A POST OFFICE BOX)	Saint Petersburg, F.	1 33747
3. If amending the registered agent and/or registered office a	ddress on our records, enter the	name of the new registered
gent and/or the new registered office address here:		
Name of New Registered Agent:		
	·	<u> </u>
New Registered Office Address:	Enter Florida street address	
	emer r torida street address	
	Florid	a Zip Code
	, tử	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
			□Add
			□Remove
			□Change
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an effec <mark>Vote:</mark> - If	e date, if other than tive date is listed, the date the date inserted in th t's effective date on the	e must be specific a is block does not	nd cannot be prior to t meet the applicab	date of filing or more	than 90 days after fili	il) ng.) Pursuam to 605,0207 te will not be listed as
is filed						The 90th day after the
ated	<u>Septemb</u>	er al_	. <u>2020</u>			
			7 20 20	,		
•		Signature of	a member or authori.	jeune red representative of	i member	

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