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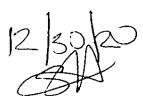
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COVER LETTER

TO: Registration Sec Division of Cor			
······································	LI AVAY VI		
SUBJECT:	Y YAYA LLO	Limited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are s	submitted for filing.	
Please return all correspo	ndence concerning this mat	ter to the following	
	N,KE	Name of Person	
		MY YAYA LLC Firm/Company	
	712 Jan	NESTOWN BLUD AP	T 2284
	ALTAMON	TE SPEINGS FL 3 City/State and Zip Code	2714
	NKAYA E-mail addres	HKO YAHDO.COM ss: (to be used for future annual report not	ification)
For further information c	oncerning this matter, pleas	se call:	
N. KAYAH K	ersey	at (407) 334 Area Code Daytin	3449
Name o	i rerson	Alea Code Dayun	ie retejnote (vanoe)
Enclosed is a check for the	he 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,
<u>Mailing Addres</u> Registration		Street Address: Registration Se	
Division of C	Corporations	Division of Co The Centre of	•
P.O. Box 632 Tallahassee.			be Street. Suite 810

Tallahassee. FL 3230

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

My Ynyn 110

	In LLC
(A F	iability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Liabil	ity Company were filed on TULY 27, 2020 and assigned
Florida document number <u>L2000</u> 220777	
This amendment is submitted to amend the following	ıg:
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 abbreviat "L.L.C."
mast be distinguishable and contain the words	Limited Liability Company, 'the designation "LLC" or the abbreviat "L.L.C."
Enter new principal offices address, if applicable	
(Principal office address MUST BE A STREET A)	DDRESS) WY TO THE RESERVE TO THE RES
•	i i i i i i i i i i i i i i i i i i i
	- - 3 0
Enter new mailing address, if applicable:	प्रेम्प्ट केरिया केरिय
(Mailing address MAY BE A POST OFFICE BOX	
	2 (This of the state of the sta
B. If amending the registered agent and/or regist	ered office address on our records, enter the name of the new registered
agent and/or the new registered office address her	re:
	Tet in N/A
Name of New Registered Agent:	14/1.
New Registered Office Address:	•
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Regist	
The state of the s	or correction.

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.

A MARKETA Bir Kinda.

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
AMBR	N'KAYAH KERSEY	712 JAMESTOWN BLVD APT 2284	
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		32714	Change
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Affective date, if other the can effective date is listed, the can enter the date inserted in locument's effective date or	date must be specific a this block does no	and cannot be prior of meet the applic	to date of filing or r able statutory filin	(option or than 90 days after than 90 days after the requirements, this	filing.) Pursuant to 605.0
record specifies a delayed of is filed.	effective date, but r	not an effective ti	ime, at 12:01 a.m.	on the earlier of: (b) The 90th day after
ated 11 18 2020)	-· -	<u></u> ·		
	71			7	
	///.	X			
	Signature of	a member or author	orized representative	of a member	