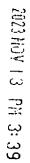


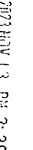
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiliess Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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11/13/23--01018--017 **80.00







COVER LETTER

TO: Registration Sect Division of Corpo	ion rations	•	,
SUBJECT: Pul	1 Up N Du Name of Limi	-mo LLC ted Liability Company	· •
The enclosed Articles of Ar	nendment and fee(s) are subr	nitted for filing.	
Please return all correspond	ence concerning this matter t	o the following:	
		Susma Name of Person IF (Pull Up ND) Firm/Company	impl(C)
		5th Terrace. Address	
		dardale, FL. 3: City/State and Zip Code MOIC@gmail. o be used for future annual report notifi	
For further information con	cerning this matter, please ca	11:	
Tatiania, Name of P	Jusma erson	at (786) 271- Area Code Daytime	2258 Telephone Number
Enclosed is a check for the	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)
M W A J J		Canada Addinggo	

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**

(Namb of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records,) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L20000233103</u> .	were filed on <u>08/04/20</u>	20 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	na	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	n a	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	nla	2023/1:01
B. If amending the registered agent and/or registered office a	ddress on our records, enter the na	me of the new registered
agent and/or the new registered office address here:	LO LO	- ω •
Name of New Registered Agent:	ria	
New Registered Office Address:	Enter Florida street address A Florida	nla
New Registered Agent's Signature, if changing Registered Agent;	City	Zıp Code

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
AMBR	Harold Francois	1429 NE5th Terrace.	□Add
		Fort Landerdale, FL33	30 Y Kemove
			□Change
	nla	na	□Add
			□ Remove
			□Change
	-na	na	\ \ Add
			□Remove
			□Change
	-n $ a $	nla	□ Add
			□Remove
			Change
	na	nla	□Add
			□Remove
	1		□Change
	na		□Add
			□Remove
			□Change

Page 2 of 3

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-	
(If an eff <u>Note:</u>	ve date, if other than the date of filing:
f the rec b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	November 3rd, 2023.
	Signature of a member or authorized representative of a member
	Typed or printed name of signee