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(Re	equestor's Name)	<u>.</u>
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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
	The Anac (Troup PLLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	I Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Nadia Anac		•
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		The Anac Group PLLC		
			Firm/Company	
		7317 S Desoto Street		
			Address	
		Tampa, FL 33616		
			City/State and Zip Code	
		nadia@theanacgroup.com		
For further in	džemation e	E-mail address: (oncerning this matter, please co	to be used for future annual report not	ification)
i or intrict ii	mormation c	oncerning ans matter, picase co	an,	
			at () Area Code Davtir	ne Telephone Number
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25,00 F	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)
Mai	iling Addres	i <u>s:</u>	Street Address:	
Reg	gistration !	Section	Registration Se	
Division of Corporations P.O. Box 6327		Division of Co The Centre of	•	
), 1308-052 Iahassee,			rananassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Thte Anac Group PLLC		
(Name of the Limited Liah	ility Company as it now appears on our da Limited Liability Company)	records.)
ty Lion	ida Limited Liantitty Company)	₽ ₹,
		= \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
The Articles of Organization for this Limited Liability	Company were filed on	and signed
Florida document number		了一 <u>量就</u>
Tronda document nameet	 '	
This amendment is submitted to amend the following:		P 제의(
A. If amending name, enter the new name of the lin	mited liability company here:	3: - 2
<u> </u>		कुछ 😤
		•
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORFSS)	
Trincipal office data est months be more better		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register	ed office address on our records.	enter the name of the new register
agent and/or the new registered office address here		enter the manie of the new regime.
agent and the terminate of the manner	•	
Name of New Registered Agent:		
	_	
New Registered Office Address:		
	Enter Florida street	address
	City	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 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	Cydney Reagan	200 Booth Road, Suite D. Ormond Beach, FL 32147	Add :
			Remove.
			∵
MGR	Cydney Reagan	200 Booth Road, Suite D, Ormond Beach, FL 32147	PN State of the s
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			□Change
			□Add
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ective date, if other than the discretive date is listed, the date must te: If the date inserted in this block nument's effective date on the Department.			irements, this date wil	THOC DC II.	
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