## L20000293043

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## **COVER LETTER**

10;	Division of Corpor					•	<i>?</i> *
SUBJE	:cт: <u>Соуа\</u> е	:V+	Empir				
			Name of Lim	ited Liability Cor	npany		
The end	closed Articles of Am	endment an	d fee(s) are sub	mitted for filing	<u>;</u> .		
Please (	return all corresponde	ence concer	ning this matter	to the following	<u>?</u> :		
		Ant	onio r	Y\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Person		_
				Firm/Con	npany		_
		1223	B.E.LO	isfayett Addre	e Stre	et	_
		Tan		-	3230\ Zip Code		_
	-	Mr. P	E-mail address: (	to be used for fut	ure annual report no	Y\ otification)	
For fur	ther information conc	erning this r	natter, please ca	all:			
<u>Ja:</u>	Name of Pe	rson		at ( <u>85</u> Area	50) 570 Code Dayti	- 109105 mc Telephone Numb	cr
Enclos	ed is a check for the f	ollowing an	iount:				
		□ \$30.00 Fi		S55.00 F Certified (additional		Certifie	Filing Fee, eate of Status & ed Copy al copy is enclosed)
	Mailing Address: Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	orations			Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oo Street, Suite	810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

_Covalent	Empire LLC	2023 JAN -4 AM 9: 54
( <u>Name</u>	of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
Florida document number $\perp_{\mathcal{A}}$	Limited Liability Company were filed on 9	and assigned
This amendment is submitted to ame	nd the following:	
A. If amending name, enter the ne	w name of the limited liability company her	<u>re</u> :
The new name must be distinguishable and c	ontain the words "Limited Liability Company," the de-	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address	, if applicable:	
Principal office address MUST BE	4 STREET ADDRESS)	
Enter new mailing address, if appli	<del></del>	
Mailing address MAY BE A POST	<u> </u>	
B. If amending the registered agen	and/or registered office address on our rec	cords, enter the name of the new registered
igent and/or the new registered off	<u>ce address here</u> :	
Name of New Business A		
Name of New Registered A	<u>tent:</u>	
New Registered Office Add	<del></del>	a street daaress
	Cuy	, Florida Zip v.oae
New Registered Agent's Signature, if o	hanging Registered Agent:	
provisions of all statutes relative to accept the obligations of my position	registered agent and agree to act in this ca the proper and complete performance of n n as registered agent as provided for in Ch ge in the registered office address. I hereby g of this change.	y duties, and I am familiar with and apter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) or removed from our records:	authorized to manage, enter the title, name, and address of each person	being added
NACE NA		

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP	Antonio A miler Jr	1223 E. Lafayette St.	□Add
		Tanarassee, FL 32301	Remove
			□Change
AP_	John H. Toleman	1223 E. Lafayette St.	□Add
		Tallanossee, FL 32301	
			□Add
			Remove
			□Change
<u> </u>			□ Add
			□Remove
			□Change
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