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(Re	equestor's Name)	
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COVER LETTER

TO: Registration Sect Division of Corpo				
suвјест: Д	Rel chun Mainlenane UC Name of Limited Liability Company			
The enclosed Articles of A	amendment and fee(s) are submitted for filing.			
Please return all correspond	dence concerning this matter to the following:			
For further information cor	Name of Person By Real Mander and Company I Company Address City/State and Zip Code E-mail address: (to be used for future annual report notification) Incerning this matter, please call:	SECRETARY OF STATE	2023 SEP -6 PM 1: 36	And
Name of I	Person Area Code Daytime Telephone Number	<u> </u>		
Enclosed is a check for the	e following amount: S30.00 Filing Fee & S55.00 Filing Fee & S60.00 F Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified	ate of Sta	ntus &	
<u>Mailing Address:</u> Registration Se				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

(Name of the Limited Liability (A Florida	ity Company as it now appears on our rational Liability Company)	ecords.)
The Articles of Organization for this Limited Liability C	Company were filed on Feb 12	and assigned
Florida document number LOUS 8177		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim The new name must be distinguishable and contain the words "Lim		"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	MA	
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>e</u>	SECRE HARY OF STEEL STEE
Name of New Registered Agent: New Registered Office Address:	Enter Florida street a	ddress
	City	, Florida
	•	•

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>	<u>Address</u>	Type of Action
			□ Add
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an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days lote: If the date inserted in this block does not meet the applicable statutory filing requirements		
beument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of is filed.	of: (b) The 90th d	lay after th
ated		
Signature of a member or authorized representative of a member Typed or printed name of signee		
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