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## **COVER LETTER**

Division e	of Corporations			
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SUBJECT:	Raymond	<u>Laterprise</u>	nited Liability Company	
		rame or the	инессыянну Сопрану	
The enclosed Artic	les of Amendment a	nd fee(s) are su	abmitted for filing.	
Please return all co	rrespondence conce	rning this matte	er to the following:	
		Leno R	Sarment	
			Name of Person	
			Proposes Lee The of Limited Liability Company  are submitted for filing.  Is matter to the following:  Reprod  Name of Person  Firm/Company  Address  Bay Fr 37507  City/State and Zip Code  85 O 9 Mg 1 Com  address (to be used for future annual report notification)  please call:  at (321) 365 - 1758  Area Code Daytime Telephone Number  Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	
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	PAC	m Bay	FL 32907	<del></del> _
		E-mail address:	(to be used for future annual report noti	tication)
For further informa	tion concerning this	matter, please	call:	
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Mailing A	Address:		Street Address:	

TO:

Registration Section

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**

しいたいかれる テカヤイ ひくわぐ)	123 KE -C PH 2:47
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 2000 319 601</u> .	y were filed on and assigno
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C.
Enter new principal offices address, if applicable:	1625 Grange Blossom Trail
(Principal office address MUST BE A STREET ADDRESS)	Palm Buy FC 32905
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	address on our records, enter the name of the new re
	address on our records, <u>enter the name of the new re</u>
agent and/or the new registered office address here:	
	address on our records, enter the name of the new re  Enter Florida street address  Florida

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 3 1/( 7.1. 2: 1/7	Type of Action
MGR	SENEUA STERPLENSON	471 Mercary Ave SE	🗆 Add
		AP1 102	⊠Remove
		PALM BAY 32407	□Change
		·	□ Add
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(If an effect <u>Note:</u> If	e date, if other than the date of filing:	ant to 605.0207 (3)(ot be listed as the
ne record s ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th i.	day after the
Dated	October 25 in 2020	

Typed or printed name of signee