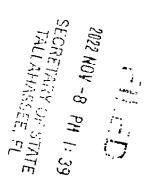
L20000339448





600397279406

11/08/22--01013--063 **25.00



COVER LETTER

1

	egistration Section Section of Corp								
CUDIECT	Shupe Enterprises LLC								
SUBJECT: Name of Limited Liability Company									
The enclos	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.						
Please retu	ım all correspon	ndence concerning this matter	to the following:						
		Stephanie Goebel							
			Name of Person Firm/Company O3 Address City/State and Zip Code be used for future annual report notification)						
		ZenBusiness Inc.							
	ZenBusiness Inc. Firm/Company 5511 Parkcrest Drive, Stc. 103								
		5511 Parkcrest Drive, Ste.	103						
		· · · · · · · · · · · · · · · · · · ·	Address	<u> </u>					
		Austin, TX 78731							
			City/State and Zip Code	······································					
		fulfillment@zenbusiness.co							
		E-mail address: (to be used for future annual report notifi	cation)					
For further	information co	oncerning this matter, please of	all:						
Stephanic	Goebel c/o Zei	nBusiness Inc.							
	Name of	Person	Area Code Daytime	Telephone Number					
Enclosed i	s a check for th	e following amount:							
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy					

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shupe Enterprises LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L20000339448	y were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	12047 Cypress Ln Clermont,	FL 34711
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of	12047 Cypress Ln Clermont,	
registered agent and/or the new registered office address her		of the mane of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	255
	F	lorida
	Cin·	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>	Name	Address	Type of Action
AMBR	Christopher Shupe		
			☐ Remove
		12047 Cypress Ln Clermont, FL 34711	■ Change
AMBR	Adriana Mendes Shupe	12047 Cypress Ln Clermont, FL 34711	■ Add
			Remove
			☐ Change
 .			□ Add
			Remove 2022 NOV
			OV -8 PH I; 39
			☐ Change
			☐ Remove
			Change
			☐ Remove
			Change

					
4,		····			
					
				 	
·					
			<u></u>	·· ·	
					<u> </u>
			· · ·		
	=		<u> </u>		
ective date, if other than the effective date is listed, the date in	date of filing:	he prior to date o	filing or more than	(optional) 90 days after filing.)	Pursuant to 605.0
e: If the date inserted in this b	ock does not meet the	applicable stat	utory filing requir	ements, this date w	zill not be listed
ument's effective date on the D	epartment of State's r	ecoras.			
record specifies a delaye	d effective date. b	out not an ef	fective time, a	it 12:01 a.m. o	n the earlier
he 90th day after the rec			·		
October 23	2022	! •			
/s/ Christopher Shupe					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00