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COVER LETTER

TO:	Registration Sect Division of Corpo			
SUBJI	r <i>c</i> t.	Neidin L	LC.	
SOBJI	ECI:	Name of Limite	ed Liability Company	
The en	nclosed Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please	return all correspon	dence concerning this matter to	o the following:	
		Zhillip	C. Sunkel #	
			leidin LLC Firm/Company	
		6100 8+n	Sd.,	 ,
		Ven Beac	City/State and Zip Code City/State and Zip Code Com (as a company)	68
		SUNKel. DE-mail address: (to	o be used for future annual report notifi	t. net
For fu	inther information co	oncerning this matter, please ca	11:	·
	Phillip C. Name of	SunkelII	at (772) · 321 · 3 Area Code Daytime	3267 Telephone Number
Enclo	sed is a check for th	e following amount:		
∞ 1 \$	25.00 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)
	Mailing Address Registration S		Street Address: Registration Sec	etion

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

Neidin	LLC
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)
The Articles of Organization for this Limited Liability (Florida document number	Company were filed on $1/4/2024$ and assigned 7.82
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	PRESS)
	. .
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>enter the name of the new registere</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, 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>	Address	Type of Action
MGR	Phillip C. Sunkel	6100 84h St	🗀 Add
		Vero Beach, FL. 32968	□Remove
			D X Change
MGR	Suzanne Sunkel	600 8th St	🗆 Add
		Vero Beach, FL. 32968	□Remove
			🗗 Change
			□Add
		 	□Remove
			∓ □Change
			□Add
			□Remove
			□Change
	 		□Add
			🗖 Remove
			□ Change
			□Add
			□Remove
			Change

	rmation, enter change(s) her			
We are up	dating our m	6R addre	ss since	we have
move from	300 3 calcut	n Dr. Ver	Beach F	Z 32960
	8 du St. Vero I			
Thanks/	<u> </u>	<u> </u>		
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te: If the date inserted in t	te must be specific and cannot be printed by the block does not meet the appoint Department of State's reconstitution.	licable statutory film	nore than 90 days afte	onal) r tiling.) Pursuant to 605.02 is date will not be listed
cord specifies a delayed et s filed.	fective date, but not an effective	e time, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
icd June 7	2021	<u>t_</u> .		
	Mally (. Sw.) Signature of a member or at	MAZ_ athorized representative	e of a member	
	•	C. Sunkel		

Filing Fee: \$25.00