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(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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HASSEE, FL

COVER LETTER

	gistration Se vision of Cor				
SUBJECT:	DOCKAGE				
		Name of Limited Liability Company			
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	n all correspo	ndence concerning this matter	to the following:		
		Luis F Venerio Salazar			
			Name of Person		
		Dockage 56, LLC			
			Firm/Company		
		13000 SW 110 Ave			
			Address	 	
		Miami, FL 33176			
			City/State and Zip Code		
		luisvenerio@gmail.om	to be used for future annual report not	ification)	
For further i	nformation co	oncerning this matter, please co	•	meanony	
Luis F Vene	erio Salazar		305 773-6000		
	Name of	`Person	Area Code Daytin	ne Telephone Number	
Enclosed is	a check for th	e following amount:			
≅ \$25.00 l	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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

FILED

2022 JUN 13 AM 8: 54

__, Florida ___

(Name of the Limited Liability Company as it now appears on our records:)

(A Florida Limited Liability Company)

TALLAHASSEE.FL The Articles of Organization for this Limited Liability Company were filed on Feb 3, 2021 and assigned Florida document number L21000059426 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

Dockage 56, LLC

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.

City

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	Louis McMillian	1012 Hunting Lodge Drive, Miami Springs, FL 33166	6 ■ Add	
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e record sp rd is filed.	pecifies a delayed eff	ective date, but	not an effecti	ve time, at 12:	:01 a.m. on the	e earlier of: (b) The 90th	day after	the
Dated	JUNE 6	·		Z					
	(天ル	袋 .						
		Signature	of a member or	authorized repr	esentative of a	nember			