121000090895

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

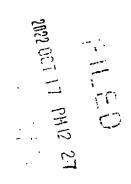
Office Use Only



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LLC N/c Amend

10/17/22--01017--018 **25.00



A. RAMSEY
JAN 10 2023

COVER LETTER

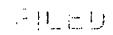
	Registration S Division of Co			
SUBJEC	Regenasil	LLC		
SOME	· · ·	Name of Lin	nited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Kenneth Domke		
		<u> </u>	Name of Person	
		Sil Solutions LLC		
			Firm/Company	
		10801 Starkey Road, Suite	2 104, Box # 263	
			Address	
		Seminole, FL 33777		
			City/State and Zip Code	
		management@regenasil.co	m to be used for future annual report no	ristantian)
For furthe	er information c	toncerning this matter, please c	·	inication,
Kenneth	Domke		727 688-9515	
	Name e	of Person	at () Area Code Daytir	ne Telephone Number
Enclosed	is a check for the	he following amount:		
\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)
	Mailing Addres		Street Address:	
	Registration 5 Division of C		Registration Se Division of Co	
	P.O. Box 632		The Centre of	•

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 GCT 17 PM 12 27

Regenasil LLC				
(Name of the Limit	ed Liability Comp (A Florida Limited	any as it now appear Liability Company)	s on our records.)	5,1 1 0 7
The Articles of Organization for this Limited L	iability Company	were filed on Fe	bruary 24, 2021	and assigned
lorida document number L21000090895				
his amendment is submitted to amend the foll	owing:			
If amending name, enter the new name o	f the limited liab	oility company he	<u>re</u> :	
Sil Solutions LLC				
he new name must be distinguishable and contain the v	cords "Limited Liab	ility Company," the d	esignation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A		
rincipal office address MUST BE A STREE	<u>(T ADDRESS)</u>			.=
nter new mailing address, if applicable:		N/A	···	
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
. If amending the registered agent and/or r gent and/or the new registered office addres		address on our re	ecords, <u>enter the r</u>	name of the new registe
gent and/or the new registered office addre	ss nere:			
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Flor	ida street address	
			, Florida	1
		City		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
N/A			🗆 Add
			□Remove
			□Change
			□Remove
			□Change
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			□Change
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			⊟Remove
			☐Change
			□Add
			□Remove
			□Change

Page 2 of 3

N/A				
				··
				
		 		
				
				
	October 24	2022		
ective date, if other than the effective date is listed, the date must	date of filing:	to date of filing or more	(optional)	rsugnt to 605 02
e: If the date inserted in this blo	ick does not meet the applic	able statutory filing re	equirements, this date wil	I not be listed :
ument's effective date on the De	partment of State's records.			
	re u la			
record specifies a delayed he 90th day after the reco	effective date, but no ord is filed.	t an effective tim	e, at 12:01 a.m. on	the earlier
,,,				
	2022			
October II	2022			
ed		<u> </u>		
ed		 5;1 5	glatinic 1	. L.C
ed	Signature of a member or mithe	$\frac{5}{1}$	elations L	<u>_ L C</u>

Page 3 of 3

Filing Fee: \$25.00