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2021 MAR 25 A II: 52

COVER LETTER

TO:		ation Sec of Corp		
CUDIE		3 Carolina	Ave LLC	
SUBJECT: Name of Lin			Name of Lin	nited Liability Company
The encl	losed Art	icles of A	mendment and fee(s) are sub	omitted for filing.
Please ro	eturn all c	correspon	dence concerning this matter	to the following:
			Eric Payne	
				Name of Person
				Firm/Company
			69 Poor Farm Road	
				Address
			Pennington NJ 08534	
			ericsells4u@gmail.com	City/State and Zip Code
			E-mail address: (to be used for future annual report notification)
For furth	er inforn	nation cor	ncerning this matter, please c	all:
Dominic	ck Prevet			908 220-6404 at ()
		Name of I	rerson	Area Code Daytime Telephone Number
Enclosed	lis a che	ck for the	following amount:	
□ \$ 25.	00 Filing	, Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	## - '!'	4 4 4 		MAR 26
Mailing Address: Registration Section			Street Address: Registration Section	
	Divisio	n of Co	rporations	Division of Corporations 🚍 🔾
P.O. Box 6327 Tallahassee, FL 32314		32314	The Centre of Tallahassee	
	танала	35cc, r1	2 323 14	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited			
(A)	Liability Company as it now appear. Florida Limited Liability Company)	s on our records.)	·····
The Articles of Organization for this Limited Liabi Florida document number L21000100923	lity Company were filed on Ma	rch 2nd 2021	and assigned
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of th	e limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the de	signation "LLC" or the ab	previation "L.L.C."
Enter new principal offices address, if applicabl	e:		
Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BO.	<u>~</u>		
B. If amending the registered agent and/or registered affice address have a sent and/or the new registered office address have a sent and of New Registered Agent:	stered office address on our re ere:	cords, <u>enter the nam</u>	of the new registere
New Registered Office Address:	Enter Florie	da street address	
	Enter Florie		~ C3
	Enter Florid City	da street address, Florida	Zip Code
	City		

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>	<u>Address</u>	Type of Action
AMBR	Eric Payne	69 Poor Farm Road	
		Pennington New Jersey ()8534	□Remove
			□ Change
MGR	Payne Eric	69 Poor Farm Road	
		Pennington New Jersey (8534	■Remove
			☐ Change
			□Remove
			☐ Change
			□Add
			□Remove
			25
			→ □Add 7 = □
			□Change
			□Add
			□Remove
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	<i>;</i>	2021	
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	:	207 HAR 26	
ffective date, if other than the date of filing:	(optional	MAR 26 A	
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than	(optional	MAR 26 Austrant	1 1 16 60 0207
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