## L2100011683Z

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S. PRATHER

## **COVER LETTER**

IO:				
SUBJ	ECT: CACHELI	LE-DU, LLC		
0000	<u></u>		ited Liability Company	
The er	iclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  PAUL SEUSY  Name of Person  PAUL BENNETT SEUSY, P.A.  Firm/Company  P.O. BOX 230  Address  ARCADIA, Fl. 34265  City/State and Zip Code  paul@paulseusy.com  Benial address: (to be used for future annual report notification)  For further information concerning this matter, please call:  PAUL SEUSY  Name of Person  Area Code  Daytine Telephone Number  Enclosed is a check for the following amount:  Secretificate of Status  Certificate of Status  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, Fl. 32314  Nominos Street, Suite 810				
			Name of Person	Daytime Telephone Number  S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Address: ration Section on of Corporations entre of Tallahassee
		PAUL BENNETT SEUSY	′, P.A.	
			Firm/Company	<del></del>
		P.O. BOX 230		
		<del></del>	Address	
		ARCADIA, FL 34265		
			City/State and Zip Code	
				78 <del>- 1</del>
For fur	ther information c		·	ilication)
PAUL	. SEUSY		at ( 863 ) 491-7285	
,, <b>= -</b>	Name o	f Person		ne Telephone Number
Enclos	ed is a check for the	ne following amount:		
<b>=</b> \$2	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
				ection
V	Division of C	orporations	Division of Cor	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CACHELLE-DU, LLC			1022
(Name of the Lim	ited Liability Co (A Florida Lim	ompany as it now appears on our record ited Liability Company)	
The Articles of Organization for this Limited I	Liability Comp	pany were filed on March 11, 2021	UZZ JUL 186 PH 2: 5
Florida document number L21000116832	·		子·
This amendment is submitted to amend the fol	lowing:		2: 55 VATE ORIDA
A. If amending name, enter the new name	of the limited	liability company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited I	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	
(Principal office address MUST BE A STRE	ET ADDRES!	<u> </u>	
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	(BOX)	-	
	<del></del>	-	
B. If amending the registered agent and/or agent and/or the new registered office addresses		ice address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:	N/A		
New Registered Office Address:			
		Enter Florida street addres.	y
		, Flo	orida
		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 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
N/A	N/A	N/A	□Add
			□Remove
			□Change
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			□Remove
			□ Change

THE CORRECT FEDERAL EMPLOYER IDENTIFICATION NUMBER FOR CACHELLE-D	U, LLC. IS	
86-2858311. PLEASE REMOVE ANY OTHER EIN NUMBER FROM THE SUNBIZ WEBS	ITE.	
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ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing of the date inserted in this block does not meet the applicable statutory filing requirements, this date occument's effective date on the Department of State's records.  Trecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	ite will not be t	isted as
is filed.	The 90th day at	
ated July 1374 2022	[[::4];	122 JU
Signature of a member or authorized representative of a member		t to 605.0207 (3)(1) be listed as the
CATHERINE R. SCOTT, MGR /MEMBER		
- A STATE OF THE S	<u> </u>	

Filing Fee: \$25.00