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(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	Oded by Juz	ZV LLÜ ited Llability Company		
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Just	Name of Person		
	Bichi	By UZZY Film/Company		
	401 EUSX JUC	KSON SKREK. SUI)	re. 2340	
	Bodied by Ju	TEBUOZ City/State and Zip Code ZZY ONDO . [N to be used for future annual report notif	<u>M</u> icationi	
For further information ec	oncerning this matter, please co	dl:		
<u>JÜSMINE</u> Name of	MUMPHY	at (<u>813</u>) <u>- 748</u> Area Code Daytime	Telephone Number	42723 42723 2
finelosed is a check for th	/		- 1 - 1 - 1 = 1	,
□ 825.00 Filing Fee	S S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (1) cadditional copy is enclosed)	فوي:»*

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

Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Li Florida document number $\perp \!\!\! \! \! \! \! \! $	iability Company were filed on $\underline{\mathcal{O}/ \mathcal{A}/\mathcal{A}\mathcal{V}\mathcal{A} }$ and assigned
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	f the limited liability company here:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.1 C."
Enter new principal offices address, if applic	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE)	BOX)
B. If amending the registered agent and/or ragent and/or the new registered office addres	egistered office address on our records, <u>enter the name of the new registered</u> ss here:
Name of New Registered Agent:	Jasmine Murphy
New Registered Office Address:	401 EUN JUKSON STRECT. SVIXC. 2340 Enter Florida street address
	Florida 33002

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
			
			URemove
			□Change
			□Add
			□Remove
			□☐Change
			Fladd
			□Remove
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		- 	□Remove
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			∐Change

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Note: 4	re date, if other than the date of filing:
the record ecord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated_	Flbruary 5 2022
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00