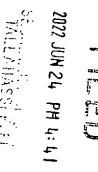


(Re	equestor's Name)				
(Ad	dress)				
(Ād	idress)				
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:					
PICK-UP	MAIT	MAIL			
(Bu	isiness Entity Nar	ne)			
(Do	ocument Number)	· · ·			
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				





06/24/22--01015--017 **25.00



COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	Akho Name of Limi	wHUA'S TILE LI	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Grus	rtavo Atchor	tua
	Atel	nortua's Tile	Liability Company ed for filing. the following: CVO Atchor too Name of Person Your Tile LLC Firm/Company Your Club blvd Apt 205 Address Address UStine FL, 32084 in/State and Zip Code Coa Atlante Com used for future annual report notification) at (904) 615 3223 Area Code Daytime Telephone Number
	510 F	lovida club b	
	St. F	Gity/State and Zip Code	12084
	(tustile E-mail address: (i	to be used for future annual report notif	COVY ication)
For further information of	concerning this matter, please ca		
GVStavo Name o	Afehortuch of Person	at (<u>904</u>) <u>615 7</u> Area Code Daytime	3223 Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status		Certificate of Status & Certified Copy

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

Alehortuc	is Tile L	LC:	2022 JUN 24 PM 4: 42
(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appear da Limited Liability Company)	<u>s on our records.</u>)	TALLAHASSELLE
The Articles of Organization for this Limited Liability Florida document number <u>L2100019</u>		4126/2	2021 and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lir	nited liability company he	<u>ere</u> :	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the d	esignation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	 		<u>. </u>
(Principal office address MUST BE A STREET ADD	ORESS)		
		<u>. </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register agent and/or the new registered office address here		ecords, <u>enter the</u>	name of the new registered
Name of New Registered Agent:			
New Registered Office Address:	E.o. 171	rida street address	
	Liner Flor		1_
	Ciţ	Florid	1a Zip Code
New Registered Agent's Signature, if changing Register	red 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
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
		•	□Remove
			□Change

W(would 4 Nam		10.	7011	NOVE C		<u>.Jr</u>	PCIII		
	ona = (n el-c.	10 1	Aleha	irtra	Ţr.	 			
(10)		607 =	_]	$\mathbf{\mathcal{O}}$				
\(\text{U} \) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 	HTT COYL	<u> </u>	CIUTS	<u>kuu</u>	MKNC	W PON				
				- 					·- -	
									2022	
								ALL	ال الحال (
								H.A.	JUN 24	1
						<u> </u>		<u> </u>	PM L:	
								<u></u>	-	
								,	<u> </u>	
		·	· · · · · · · · · · · · · · · · · · ·							
			·		<u> </u>		.			
Effective d	ate, if other th	an the date	of filing				(onti	onal)		
f an effective	date is listed, the ce date inserted in	date must be sp	ecitic and o	annot be pri	or to date of fi	ing or more tha	n 90 days after	filing.) Purst	iant to 605	.0207 ed as i
	effective date of					,, ,,g . .				
	·~ ,, ,	cc		CC vi	.' . 13.1		11	The West	Can	- 41
recora spe d is filed.	cifies a delayed (errective date	, but not a	n checuve	time, at 123	or a.m. on the	earner of: (c	i) the som	i day anei	rine
		0 =		٠.	_					
Tatad	6 21	22		73/3	<u>Sp</u> m					
)aicu			<i>AM</i>							
Jaieu		\sim								
- Jaieu		-0				sentative of a m				