L210000201525

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: <u>Best</u>	For Less Paf	essional Service ited Liability Company	SLLC	
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.		
Please return all correspond	lence concerning this matter	to the following:		
(Sherae Hun			
``	Dest for CESS	professional Sere	nce	
		e Green Brive		
,	Jacksmille hudsonshen	City/State and Zip Code		2022 OC SECRE
	E-mail address: (to be used to future annual report not	_	-M 전 :
For further information con	cerning this matter, please ca	all:		TARY OF S
Shenae Hud	ison	all: at (<u>954</u>) <u>762-0</u> Area Code Daytin	348	2022 OCT 24 AM II: OT SECRETARY OF S AT
Name of P	erson	Area Code Daytin	ne Telephone Number	严 9
Enclosed is a check for the	following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &
Mailing Address: Registration Se Division of Co P.O. Box 6327		Street Address: Registration Se Division of Co The Centre of	rporations	
Tallahassee, FI	, 32314		rananassee oe Street, Suite 81	.0

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Best For Less Profession (Name of the Limited Liability Company) (A Florida Limited L.)	Services ny as it now appears on our records.) Tability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000261525</u>	were filed on April 35, 20 Z and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabilite Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC" or the absolution LLC." Company Com
Enter new mailing address, if applicable:	1902 Annore GreenDrive
(Mailing address MAY BE A POST OFFICE BOX)	Sacksonville, FL 32246
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Constant Edward on Library

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.

City

___, Florida ____

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
MGR	<u>Nadine Chambers</u>	5141 NW 30th Lane Flander	elelejada
			□Remove
			□ Change
			🗆 Add
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