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(Req	uestor's Name)	<u> </u>
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
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(Doc	cument Number)	
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COVER LETTER

	Registration Se Division of Cor			
CHD IEZ	Bee Pretty !			
SUBJEC	· I i	Name of Lim	ited Liability Company	·
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Fabrizio Lengua		
			Name of Person	
		ZenBusiness INC.		
			Firm/Company	
		5511 Parkerest Dr. Suite 1	03	
		**************************************	Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co	om to be used for future annual report notifi	ontion)
For furth	er information c	oncerning this matter, please c	·	canon
Fabrizio	Lengua		512 237-7349	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	I is a check for th	ne following amount:		
■ \$ 25.	00 Fiting Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration 5		Street Address: Registration Sec	tion
	Division of C		Division of Corp	

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 HAR -4, PM 2: 20

	A property of the state of the		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appeary on our records.)		
The Articles of Organization for this Limited Liability Company of Florida document number 1.21000202236	were filed on 2021-04-30 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 Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	4795 38th cir		
Principal office address MUST BE A STREET ADDRESS)	Apt 104		
	Vero Beach, FL 32967		
Enter new mailing address, if applicable:	4795 38th cir		
Mailing address MAY BE A POST OFFICE BOX)	Apt 104		
	Vero Beach, FL 32967		

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.

Cuv

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
AMBR	Brittany K Christian		🗆 Add
			□Remove
		4795 38th eir Apt 104 Vero Beach, FL 32967	= Change
			□Add
			□Remove
			□Change
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			□Change
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Effective date, if other than t	he date of fili	ng:		((optional)	
If an effective date is listed, the date is Note: If the date inserted in this document's effective date on the	block does not	meet the applic	able statutory fi	r more than 90 day ling requirement	s after filing.) Pursu s, this date will n	ant to 605.0207 of be listed as
ne record specifies a delay The 90th day after the r			t an effective	e time, at 12:	01 a.m. on th	ie earlier o
Dated		2022				
	/5	s/ Brittany	K Christi			
	Signature of	a member or autho	orized representat	ive of a member		

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