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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL MAIL
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SECRETARY OF STATE STORY OF CORPORATION:

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: / N, / LC 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:
RASHEED STEWART Name of Person
YNU LL C Firm/Company
3730 Cherokee VIIIA LN
JACKSUN VILLE FLONDA 32277 City/State and Zip Code Shefored Yahoo.com E-mail address: (To be used for future annual report notification)
For further information concerning this matter, please call:
PASHEED Stewart at (904) 314 - 2638 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc

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

Y. N.U LIC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000238432</u>	were filed on $\frac{09}{125}$ $\frac{12072}{2072}$ and assigned
This amendment is submitted to amend the following:	
	erainment LLC
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	3730 Cherokce Villa LA
(Principal office address MUST BE A STREET ADDRESS)	Jacksunville, FL 32277
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3730 Cherokee Villa Ln Jacksunville, FL 32277
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, enter the name of the new registered
Name of New Registered Agent: PASI	need Stewart
New Registered Office Address: 3130	Cherotee Villa Ln Enter Florida street address
JACKEN	rville Szzon

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
MGR	BAGHAUD Stewart	Jacksunville Fl 3227	DrAdd
		Jacksonville Fl 3227	<u>}</u> □Remove
			□Add
			□Remove
			□Change
			□Add
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(If an eff	ive date, if other than the date of filing:
	ent's effective date on the Department of State's records.
he recor ord is fi	d 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 led.
Dated	69/25/2022.
	Signature of a member or authorized representative of a member
	RALCED Stewart Typed or printed pane of signee