## L21000257902

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## **COVER LETTER**

TO:	Registration Section Division of Corporations	•	· · · · · · · · · · · · · · · · · · ·	•
SUBJ	ECT: LUVIY Thing	S LLC nited Liability Company		•
	nclosed Articles of Amendment and fee(s) are sub			
Please	return all correspondence concerning this matter	to the following.		
	Diana	Hiton Name of Person		9): 2)
	Ludy	Things LLC Firm/Company		91VISION OF CORPOSATIONS 2023 OCT 18 PM12: 40
	10115	Neuel valler	1 lupp	8 PM12:
	RIV	Lerview FL 3.3 City/State and Zip Code	3569	0
	E-mail address:	l. Sayor the flo	aux a gmai	i.com
For fu	rther information concerning this matter, please of	call:		
	Di ana Hiton Name of Person	at \ <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</u>	49 · 1787 nytime Telephone Number	
/	sed is a check for the following amount:  25.00 Filing Fee   S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status &
	Mailing Address: Registration Section Division of Corporations	Street Addres Registration Division of		

P.O. Box 6327

Tallahassee, FL 32314

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 Limited Liab)	ligs LLC  ility Company as it new appears on our records.)  da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L_21000_257.9</u> This amendment is submitted to amend the following:  A. If amending name, enter the new name of the ling and the ling of the l	CO OCT 18 PH 2 PH 2
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD	10115 newel valley loop  Rivervicus FL 33569
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10115 neud valley 100p Riverneu FL 33569
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, enter the name of the new registered:
Name of New Registered Agent:  New Registered Office Address:	Diana Hilton  DIIS neuel valley loop  Enter Florida street address  23510
	KIVEY WWW., Florida 33569  City Zip Code

## 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
AMBR	Lamar Hilton	10115 neuel valley 100p	
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ective date, if other than the date of filing: \( \triangle \triangle / \trian	filing.) Pursuant to 605.0	
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) is filed.	) The 90th day after	the
cd 10/15/2023 , 2023		
Signature of a member or authorized representative of a member		