121000273792

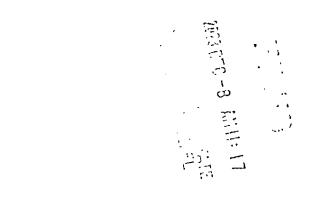
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	_
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Centricates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



400420010794

12/08/23--01025--006 **55.00





COVER LETTER

TO:	Registration Section Division of Corpor		, , , , , ,	125	*
SUBJE	CT: (M154(L)	SS OF The Range of Limited	Liability Company	shop CCC	r
		nendment and fee(s) are submit ence concerning this matter to			
		Christine	MOULC Name of Person		
		7403 S.W.	S-MANOV Firm/Company		
		2403 500, 58	Marcy Address		
			City/State and Zip Code		
		daugnter of a	be used for future annual lept ri notif	ication)	
For fu	irther information cor	ncerning this matter, please call	:		16301
Ü	Name of I	Person	at (Lo31) 388 - Area Code Daytim	9451 ETClephone Number	00
Encle	osed is a check for the	following amount:		To oce on tilling English	
□ \$	\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. C Certificate of Status Certified Copy (additional copy is enclo	

graduate the state of the state

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

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(1/4)	riorida ilitiited iliabii	ny Company)		
The Articles of Organization for this Limited Liabi Florida document number <u>(21003737</u>		e filed on June	14, 202km	d assigned
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liability	company here:		
The new name must be distinguishable and contain the word	ls "Limited Liability C	ompany," the designation	'LLC" or the abbreviati	on "L.L.C."
Enter new principal offices address, if applicab	_	145, <u>Pow</u> ompand f L. 33069	erline rd Jealla Suite	101
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	· <u> </u>	1115, POWE ompano L 33069	prline rd poorn 1 Suite	101
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office add here:	ress on our records, <u>e</u>	nter the name of th	ne new registered
Name of New Registered Agent:	MUShine	Moyer	:	- 1 C C C C C C C C C C C C C C C C C C
New Registered Office Address:	1414 5,10	Enter Florida street o	<u>Ol</u>	· 65
*	<u>Pompano</u>	BROCK City	_, Florida <u>330</u> Zîp	(C)de = 1

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 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>	<u>Name</u>	Address	Type of Action
	Christine Moyer	2403 S.W. 58 monor Fr. Lauderdale pc333	□Add
		Ft Lauderdale pc333	13 DRemove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□ Remove □ □ Change
			□ Add-F
			IRemove
			□Add
			□ Remove
			□Change

					·	
				·=	<u>.</u>	
						
				<u>.</u>		
· <u></u>	·		<u></u>			
					····	
		· · · · · · · · · · · · · · · · · · ·				
		<u></u> .				
			.,	<u>,</u>		
	<u></u>					
					<u> </u>	
	<u> </u>				<u> </u>	
					:	
Iffective date, if other that fan effective date is listed, the date inserted in	an the date of fili ate must be specific a this block does no	ing: and cannot be prior to t meet the applica	date of filing or mobile statutory filing	ore than 90 days after requirements, this	filing.) Pursuants date will not b	IC TINICCOAN II
document's effective date on	the Department o	f State's records.			· · ·	
record specifies a delayed e	ffective date, but n	ot an effective tin	ne, at 12:01 a.m. c	on the earlier of: (b		. —
	11					
Dated 1 cien be	30	<i>2023</i>	_ •			
	/					
Physical	/ 	Mallo				