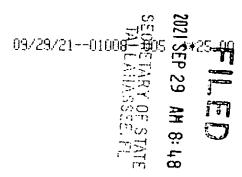
L21000276066

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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Office Use Only



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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	NNETTA ESTATES LLC Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kevin Dunnam		
		Name of Person	
	MARY ANNETTA ESTA	TES LLC	
	•=•	Firm/Company	Daytime Telephone Number S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	2702 E DESOTO STREET	•	
		Address	
	PENSACOLA, FL 32503		
		City/State and Zip Code	
	gkevindunnam@yahoo.com	1	
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please ca	all:	
Kevin Dunnam		850 602-1811	
Name (of Person		ne Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARY ANNETTA ESTATES LLC		vonde V
(<u>Name of the Limited Liability Con</u> (A Florida Limite	npany as it now appears on our rec ed Liability Company)	<u>(oi no:)</u>
The Articles of Organization for this Limited Liability Compa	nny were filed on 06/14/2021	and assigned
Florida document number L21000276066		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>\$</u>
Principal office address MUST BE A STREET ADDRESS		TO SP
		29
		ASSOCIATION OF THE PROPERTY OF
Enter new mailing address, if applicable:	<u> </u>	10100 00
Mailing address MAY BE A POST OFFICE BOX)	 	- F- 5
		, tu
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	ce address on our records, <u>en</u>	ter the name of the new reg
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street ad	ldress
	City	, Florida
	(u)	rap cour

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
AMBR	Ryan Chavers	2702 E DESOTO STREETPENSACOLA, FL 32503	s ≣Add
			□Remove
			□Change
AMBR	Wesley Hatsfelt	2702 E DESOTO STREETPENSACOLA, FL 32503	i ≣Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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effective of the	late is listed, the da date inserted in t	n the date of fil te must be specific his block does no the Department o	and cannot be pot meet the ap	plicable statuto	ng or more than 9 ry filing require	(optional) 0 days after filing.) ments, this date	Pursuant to 605.020 will not be listed a
cord spec s filed.	ifies a delayed ef	fective date, but	not an effectiv	ve time, at 12:0	I a.m. on the ea	rlier of: (b) The	e 90th day after th
ed Septe	mber 23	۱/	7 . 2021	-			
_		Signature o	a member or a	authorized repres	entative of a men	iber	