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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations			
(115 IN CT	STANDAR	D COMPANY PROJECTS LL	.c		
SUBJECT:		Name of Limi	ited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		EDITH VARGAS			
			Name of Person		
ACCOUNTING & BUSINESS SERVICES, INC					
Firm/Company					
		8200 NE 2ND AVE STE I			
Address					
		MIAMI, FL 33138			
			City/State and Zip Code		
		edith@keepingyourbook.com	m	(, .	20
		E-mail address: (t	to be used for future annual report notification)	25	2021 AUG
For further in	iformation ci	oncerning this matter, please ca	all:		S.
EDITH VAR	RGAS		786 651 1290 at ()		ပ
-	Name of	f Person	Area Code Daytime Telephone Number	107	PH 3: 52
Enclosed is a	check for th	e following amount:		( - )	
<b>■</b> \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee &	e of Statu Copy	
Reg Div		Section orporations	Street Address: Registration Section Division of Corporations The Control of Tallahaman		
r.C	P.O. Box 6327 The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STANDARD COMPANY PROJE	CTS LLC		
(Name of the Lim	ited Liability Company as it (A Florida Limited Liability	now appears on our records.)  Company)	
The Articles of Organization for this Limited I	Liability Company were :	filed on 06/14/2021	and assigned
Florida document number L21000279590			
This amendment is submitted to amend the fol	lowing:		
Florida document number L21000279590  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered			
The new name must be distinguishable and contain the	words "Limited Liability Con	npany," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	=-	
Principal office address MUST BE A STRE	ET ADDRESS)		
			2021 AUG -3 P
3. If amending the registered agent and/or agent and/or the new registered office address.	registered office addres ess here:	ss on our records, <u>enter th</u>	
Name of New Registered Agent:	ACCOUNTING & BU	JSINESS SERVICES, INC	
New Registered Office Address:	8200 NE 2ND AVE S	TE I	
	-	Enter Florida street address	
	MIAMI	, Flori	ida 33138
	Ci		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.

Dicie Vacan

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	EDITH A VARGAS	8200 NE 2ND AVE STE I	<b>■</b> Add
		MIAMI, FL 33138	□Remove
			□Change
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ffective date, if other than the date of fil	lima.						
an effective date is listed, the date must be specific	and cannot be pri	or to date of filin	g or more than 90 d	_ (option ays after fil	ing ) Purs	suant to 6	505.020
lote: If the date inserted in this block does no ocument's effective date on the Department of	of State's record	icable statutorj ls.	y tiling requireme	ints, this d	ate will	not be l	isted a
record specifies a delayed effective date, but it list filed.	not an effective	time, at 12:01	a.m. on the earlie	er of: (b)	The 90t	h day a	fter the
pated JULY 27	$\frac{2021}{1}$	·					
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J;-	1 10 1000						
Signature of	2. (V LOV O)	horized represer	ntative of a member	<u>-</u>			

Filing Fee: \$25.00