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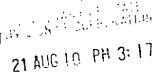


## **COVER LETTER**

	Registration Sec Division of Corp				
SUBJEC	T.	IDA SLAM LLC			
SUBJEC	·	Name of Lim	ited Liability Company		
The enclo	sed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please ret	um all correspor	dence concerning this matter	to the following:		
		KEVIN	J. CANNON		
Name of Person					
		IDA SL	AM		
			Firm/Company		
38 OHIO ROAD					
			Address		
		LAKE WORTH, FL 33467			
			City/State and Zip Code		
		kheidi I (@	gaol.com to be used for future annual report noti	(Costion)	
For furthe	er information co	ncerning this matter, please ca	•	neution,	
	CANNON	nicetining and matter, piease to	305 304-3662		
•	Name of	Person	at () Area Code Daytim	e Telephone Number	
Enclosed	is a check for the	e following amount:			
<b>≡</b> \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF THE PROPERTY OF TH



IDA SLAM	1 LLC	
(Name of the Limited Liability Compa (A Florida Limited l	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L21000304089	were filed on JULY 1, 2021 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	KEVIN J CANNON	
Principal office address MUST BE A STREET ADDRESS)	38 OHIO ROAD	
	LAKE WORTH, FL 33674	
Enter new mailing address, if applicable:	KEVIN J CANNON	
Mailing address MAY BE A POST OFFICE BOX)	38 OHIO ROAD	
	LAKE WORTH, FL 33674	
B. If amending the registered agent and/or registered office and agent a	address on our records, enter the name of the new registered	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Emer viorida street adaress	
	, Florida	

## 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

MGR = Manager

AMBR = Authorized Member

21 AUG 10 PM 3: 17

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		LAKE WORTH, FL 33467	DRemove
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	Signature	of a member or author	rized representative	of a member		

Filing Fee: \$25.00