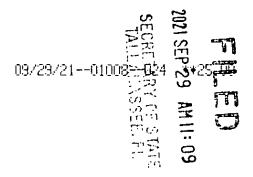
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Office Use Only



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COVER LETTER

Division of Corp	oorations		
SUBJECT: WHE	=N /1C		
30baner. <u>- p v j - c</u>	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspor	ndence concerning this matter t	to the following:	
	EMMAHUE	Name of Person LLC Firm/Company	
	KHEN	III	
	,	Firm/Company	
	1801 NE	Address	<u> </u>
	NORTH MIR	City/State and Zip Code (City/State and Zip Code (City/State and Zip Code (City/State and Zip Code	81
	E-mail address: (t	o be used for future annual report notific	cation)
For further information co	oncerning this matter, please ca		
EMMAKUE	L ALVARET	at (34) Area Code Daytime	Telephone Number
Traine Or		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•
Enclosed is a check for th	e following amount:		
区 \$25.00 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)
Enclosed is a check for th	e following amount:	□ \$55.00 Filing Fee & Certified Copy	 \$60.00 Filing Fee, Certificate of Status & Certified Copy

TO:

Registration Section

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

WHEN LLC	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 21 00 033 725</u> 1	were filed on $7-26-2021$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabili	lity Company," the designation "LLC" or the abbreviation "L.L.C."
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)	NORTH MIAMI, RE 331X1
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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
AP	FRANKY JEAN	8553 WINDSOR DR.	□Add
		8553 WINDSOR DR. MIRAMAR, FL 33025	_ ERemove
			□Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□ Change
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			□Remove
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[If an ef] Note:	ive date, if other than the date of filing:
e recoi rd is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	Money Les very
	MANUTUS NECES
	Signature of a member or authorized representative of a member