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COVER LETTER

	orporations
	Name of Limited Liability Company
	Name of Billines Blasting Company
he enclosed Articles o	of Amendment and fee(s) are submitted for filing.
ease return all corres	spondence concerning this matter to the following:
	Yahaira Rodriguez
	Name of Person
	Legally Notarized, LLC.
	Firm/Company
	11954 Narcoossee Road Ste. #2-158
	Address
	Orlando, FL 32832
	City/State and Zip Code
	info@legallynotarized.com E-mail address: (to be used for future annual report notification)
or further information	n concerning this matter, please call:
Yahaira Rodriguez	407 513-2099 at ()
Namo	e of Person Area Code Daytime Telephone Number
Enclosed is a check for	r the following amount:
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)

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

FILED

Notary Notarized, LLC.

2022 MAY 23 AM 10: 29

(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our ted Liability Company)	TALLAHASSEF, FL
The Articles of Organization for this Limited Liability Comp		
Florida document number L21000340781		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Legally Notarized, LLC.		
The new name must be distinguishable and contain the words "Limited L	iability 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	2	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	-	
B. If amending the registered agent and/or registered offi	ce address on our records, <u>e</u>	enter the name of the new register
agent and/or the new registered office address here:		
Nama of New Business A. A. A.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street e	naaress
	City	_, Florida
Now Desirtaned Acoust's Circusture if the circ Desirtaned Acoust's	•	Zip Code
New Registered Agent's Signature, if changing Registered Age		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ete performance of my dutie as provided for in Chapter (es, and I am familiar with and 505, F.S. Or, if this document is
īr <i>c</i>	hanning Penistered Agent Signal	ture of New Pegistered 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
			□Add
			□Remove
			□ Change
			□Add
		 	□Remove
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ffective date, if other than the	e date of filing:	(opti	ional)		
an effective date is listed, the date mu Note: If the date inserted in this b ocument's effective date on the E	ast be specific and cannot be prior to date of block does not meet the applicable statu Department of State's records.	filing or more than 90 days afte story filing requirements, the	r filing.) Pu is date wil	irsuant to Il not be	o 605.02 e listed
record specifies a delayed effecti l is filed.	ve date, but not an effective time, at 12	:01 a.m. on the earlier of: (I	b) The 9	0th day	after t
May 10	2022				
<u></u>	Signature of a member or authorized con	resentative of a member			_
W11 - 11) - -	\circ			
Yahaira Rodriguez					