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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

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**Enter the email address for this business entity to be used for future	21
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN: 6. FLORIDA DANIEL LLC

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Help

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From: Laura Rodriguez

COVER LETTER

TO: Registration Se Division of Cor			,	
	DANIEL LLC			
SUBJECT:	Name of Limi	ted Liability Company	_	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.		
Please return all correspo	andence concerning this matter t	o the following:		
	Cheyenne Moscley			
		Name of Person		
	Legalzoom.com, Inc.			
	Firm/Company			
	101 N Brand Blvd 11th Fl			
		Address		
	Glendale, CA 91203			
		City/State and Zip Code		
	dguay555@gmail.com			
	E-mail address: (o be used for future annual report notif	ication)	
For further information of	concerning this matter, please ea	ill:		
Cheyenne Moseley		800 773-0888 at ()		
Name o	of Person	Area Code Daytime	e Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$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	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA DANIEL LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company))
The Articles of Organization for this Limited Liability Company Florida document number 1.21000343936 This amendment is submitted to amend the following:		and assigned
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:	7796 Monarch Ct.	
(Principal office address MUST BE A STREET ADDRESS)	Delray Beach, FL 33446	
	<u>-</u>	
Enter new mailing address, if applicable:	7796 Monarch Ct.	
(Mailing address MAY BE A POST OFFICE BOX)	Delray Beach, FL 33446	
B. If amending the registered agent and/or registered o	ffice address on our records,	enter: the name of the ne
registered agent and/or the new registered office address her	<u>·e</u> :	—————————————————————————————————————
		<u>35</u> &
Name of New Registered Agent:		22
New Registered Office Address:		
	Enter Florida street address	
		rida
and the second second second	City	zip Code
New Registered Agent's Signature, if changing Registered Agent		at a same and a same about
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and provided for in Chapter 605, F	d I am familiar with and F.S. Or, if this document is

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	DANIEL J GUAY		
			☐ Remove
		7796 Monarch Ct. Delray Beach, Florida 33446	
			Add
			Remove
			□ Change
			□ Remove
			Change
			Add
			☐ Remove
			Change
	***		□ Add
			☐ Remove
			Change
			Петюче
			☐ Change

To: +18506176383	Page. 6 of 6	2021-11-18 11:10:26 PST	LegalZoom.com, Inc.	From; Laura Rodriguez

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F Cont	rive date if other than the date of filing:	(ontional)
Note:	tive date, if other than the date of filing: fective date is listed, the date must be specific and cannot be prior to date of If the date inserted in this block does not meet the applicable stat nent's effective date on the Department of State's records.	utory tiling requirements, this date will not be listed as the
he re The	cord specifies a delayed effective date, but not an ef e 90th day after the record is filed.	fective time, at 12:01 a.m. on the earlier of:
Dated	11/17/2021	
Date	Coldi	
	Signature of a member or authorized rep	

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Typed or printed name of signee

Filing Fee: \$25.00