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COVER LETTER

Division of Corporations
SUBJECT: Mante Of Limited Liability Company Subject: Mante of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Guerda Dalger Fe Lix Name of Person
Mamoo Dab Andey Diffee LLC
Address Address Address Address City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual phort notification) For further information concerning this matter, please call:
For further information concerning this matter, please call: Delicity Feet Delicity Delici
Enclosed is a check for the following amount: S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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

Mana State Compa (Same of the Limited Liability Compa (A Florida Limited Liability Compa	inv as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 121000357146	were filed on 8992021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab The new name must be distinguishable and contain the words "Limited Liabiletics".	(DEY D- FELTX LLC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	13725 N.E. GAVE HOT 201 N.Miami Fl 33306.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13725 N.E. GAVE APT 201 Novya Mia 7/1 33161
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: New Registered Office Address: 13025	Dalger Felix N.E. Othe APT 201 Enter Florida street address
New Registered Agent's Signature, if changing Registered Agent:	City Florida 33 FO 18
I hereby accept the appointment as registered agent and agrounce of all statutes relative to the proper and complete accept the obligations of my position as registered agent as publication for the registered office accompany has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Orsif this document is
If Chan	ujag Registered Agent Singstore of New Registered 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
MOR	Guerda Dalger Elix	13725 NIE GALL Aptroi North Mia 71 35161	<u>)</u> □Add
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(If an effective date is listed	d, the date must be specific a rted in this block does no	and cannot be prior to t meet the applica	o date of filing or mon ble statutory filing (e than 90 days after (illing.) Pursi	iant to 605. iot be liste	.0207 (3 ed as th
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Filing Fee: \$25.00