

3/22/22, 4:42 PM

Division of Corporations

L21000358877
Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CODEBYTES LLC

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2022 MAR 23 11:10:11

2022 MAR 23 PM 5:46
STATE OF FLORIDA
TALLAHASSEE

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Electronic Filing Menu Corporate Filing Menu

T. LEMIEUX
MAR 23 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CODEBYTES LLC
Name 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:

Cheyenne Moseley

 Name of Person

Legalzoom.com, Inc.

 Firm/Company

101 N Brand Blvd 11th Fl

 Address

Glendale, CA 91203

 City/State and Zip Code

codebytesll@gmail.com

 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley _____ at (800) 773-0888
 Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

CODEBYTES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/10/2021 and assigned Florida document number L21000358877

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Ludemann Enterprises LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

150 E Wildmere Ave., Ste. 104

(Principal office address MUST BE A STREET ADDRESS)

Longwood, Florida 32750

Enter new mailing address, if applicable:

150 E Wildmere Ave., Ste. 104

(Mailing address MAY BE A POST OFFICE BOX)

Longwood, Florida 32750

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

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2022 MAR 23 PM 5:06
STATE OF FLORIDA
TALLAHASSEE

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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	David Ludemann		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		150 E Wildmere Ave., Ste. 105 Longwood, Florida 32750	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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