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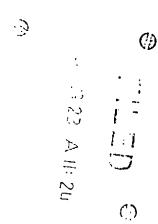
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COVER LETTER

TO:

Registration Section

Division of Corp	porations			
SUBJECT:	Andre C Name of Lim	V L C ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Andre Andre	1. Ven +vess Name of Person 1. LLC Fign/Company		
	1624 Sal	azor S+ SE	<u> </u>	
	Palm Bay	City/State and Zip Code O a Mail . O to be used for future annual report notif	9	
	Drea E-mail addres : (to be used for future annual report notif	ication)	
For further information ec	oncerning this matter, please ca)		
Andre C	Ventvess Person	at (56) LONG	O558 Telephone Number	
Enclosed is a check for th	e following amount:		:	Œ
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	••	
Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroo Tallahassee, FL	tion porations allahassee : Street, Suite 810	()

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Andre C V L L	y as it now appears on our records.)
(Name of the Limited Liability Compan (A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number $ L21000366921$	vere filed on $8/16/21$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y 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)	
D. If amonding the registered agent and/or registered office as	ddunus on our resouds arter the name of the new registered
B. If amending the registered agent and/or registered office adaptated and/or the new registered office address here:	
	<u>9</u>
Name of New Registered Agent:	(b)
New Registered Office Address:	
ivew registered extract readings.	Enter Florida street address to
	Florida / 7
	City Zip Code,
New Registered Agent's Signature, if changing Registered Agent:	2
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pa being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	e to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and rowided for in Chapter 605, F.S. Or, if this document is

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>	Address	Type of Action
MBR	Andre C Ventress	1624 Galazor St SE	- - (5Xdd
		1624 Galazor St SE Palm Bay FL, 32909	□Remove
		·	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove 🕖
			
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			Remove
			(1•) □ Change
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			□Change

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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more	(optional) : 7: e than 90 days after filing.) Pursuant to 605.0207
<u>iote:</u> If the date inserted in this block does not meet the applicable statutory filing to ocument's effective date on the Department of State's records.	requirements, this date will not be listed as
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record 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
l is filed.	
$_{\text{ated}}$ $8/18/2/$	51
Pated 8/X/Q/	Q)
\mathcal{L}_{1}	,
Signature of a member or authorized representative of	a member
Signature of a hiember or authorized representative of	

Filing Fee: \$25.00