ha1000392052

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COVER LETTER

	egistration Se ivision of Cor			
end rect	•	erstrom Enterprises LLC		
SUBJECT	:	Name of Lim	ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspo	ndence concerning this matter	to the following:	
		Filing Yolanda		
			Name of Person	
		ZenBusiness Inc		
			Firm/Company	
		5511 Parkerest Dr., Suite	103	
			Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co	om	
		E-mail address: (to be used for future annual report notifi	cation)
For further	information co	oncerning this matter, please ca	all:	
Filing Yol	anda		844 493-6249 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional 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

Diane Wetterstrom Enterprises 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 $\frac{09/02/2021}{1}$ and assigned Florida document number 1.21000392052 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Diane Wetterstrom LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) 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

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.

New Registered Agent's Signature, if changing Registered Agent:

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			Add
		 -	☐ Remove
			☐ Change
			□ Remove
			Change
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			Change
			Add
			☐ Remove
			Change

	<u> </u>
	
	
ote: If the date inserted in this	he date of filing:
e record specifies a delay The 90th day after the re	ed effective date, but not an effective time, at 12:01 a.m. on the earlier ecord is filed.
10/07	. 2021
/s/ Diane Katheryi	
	Signature of a member or authorized representative of a member
Diane Katheryn Wette	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00