KZ1 000405394

(Red	questor's Name)	
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PłCK-UP	WAIT	MAIL
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COVER LETTER

Division of Cor	porations		
SUBJECT: For	eign Exchange Name of Limi	Engine UC ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	460 s Ici	Name of Person LL Graphice LL Grand Ed. Firm/Company -kman Rd. Address CL 32811 City/State and Zip Code	
For further information c	concerning this matter, please ca	· II:	
Michael Ja Name o	mesjr.	at (<u>321</u>) <u>315-6</u> Area Code Daytim	4669 e Telephone Number
Enclosed is a check for t	he following amount:		
№ 825.00 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 tadditional copy is enclosed)

Mailing Address:

' TO:

Registration Section

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

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

FILED

2022 JUL 26 PM 12: 24 Foreign Exchange Empire U.C.

(Name of the Limited Liability Company as it now appears on our records): CRE LARY or Signification of the Limited Liability Company)

(A Florida Limited Liability Company)

TALL AHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on Florida document number L21000405394 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" 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) 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:

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, <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
AMBR_	Michael Leelamesse.	1920 Dean Road Apt 63 Jacksonville Florida 3221	\sum_Add
			□Remove
			🗆 Change
MBR	MARIC HOLLY	4610 S Kirlman Rd.	ZAdd
	·	orando, FC 32811	□Remove
			[] Change
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ffective date, if other than the date of filing: July 26 an effective date is listed, the date must be specific and cannot be prior to date of filing	2022 (optional)	
an effective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory	g or more than 90 days after filing.)	Pursuant to 605,02
ocument's effective date on the Department of State's records.	ming requirements, this date w	in nor oc useer
record specifies a delayed effective date, but not an effective-time, at 12:01. Listified.	a.m. on the earlier of; (b) The	90th day after th
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rated		
Michael Lee James JR. Typed or printed name of sign		