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COVER LETTER

	ivision of Cor		•	•				
	YENNY ENTERPRISE LOC LLC							
SUBJECT	:	Name of Limited Liability Company						
The analog	ad Articlas of	Amendment and fee(s) are sub	mitted for filing					
		indence concerning this matter	<u>-</u>					
r icase reiu	rn an correspo	maence concerning this matter	to the following.					
		YENNYLEN LAISIN						
			Name of Person					
		YENNY ENTERPRISE L	OC LLC					
			Firm/Company					
	601 NE 23rd STREET STE 903 Address							
		MIAMI, FLORIDA 33137						
	City/State and Zip Code							
	YENNYLENLAISIN@YAHOO.COM E-mail address: (to be used for future annual report notification)							
For further	information c	oncerning this matter, please ca	all:					
YENNYLI	EN LAISIN		727 667-1399					
	Name o	f Person	at ()	e Telephone Number				
		ne following amount:	FT A CONTRACT OF					
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Address:			Street Address: Registration Se	ction				
Registration Section Division of Corporations			Division of Corporations					

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

2021 NOV 15 PH 5: 22

YENNY ENTERPRISE LOCALC

(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 $\frac{09/20/2021}{1}$ _____ and assigned Florida document number 1.21000413535 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: L. V. YENNIYLEN ENTERPRISES 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

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.

City

_. Florida ___

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
			□Add
			Remove
			□Change
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Effective date, if other than the If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	st be specific and cannot be prid lock does not meet the appli	cable statutory filing requirement	
e record specifies a delayed effectived is filed.	e date, but not an effective	time, at 12:01 a.m. on the earlie	er of: (b) The 90th day after the
Dated	2021		
1	My disin,	<u> </u>	
	Signature of a member or aut	horized representative of a member	
	organitive or a member of aut	market representative of a method	
YENNYLEN LAISIN			

Filing Fee: \$25.00