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T. MATTHEWS NOV 15 2021

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Julie Ragusa LL	· ·	•
SOBJECT:C	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Julie Ragusa Name of Person	
		Julie Ragusa, L	LC
		Firm/Company	
	220	259 Woodspring	Deive
		Address	
	(Soca Raton, FL- City/State and Zip Code	33428
	E-mail address. (U Cag U Sa Comsn. of to be used for future annual report noti	CCCC fication)
For further information of	concerning this matter, please ca	ałl:	
Julie	Ragusa	at (239) 989 Area Code Daytim	1-1946
Name (of Person O	Area Code Daytim	e Telephone Number
inclosed is a check for t	he following amount:		
□ \$25.00 Filing Fec	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 632	•	The Centre of Tallahassee	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

Julie Ragus	sa, LLC
(<u>Name of the Limited Liabitiry Co</u> (A Fforida Limi	mpany as it now appears on our records.) ited Liability Company) 21 R5 5 PH 1: 41
The Articles of Organization for this Limited Liability Comp Florida document number <u>L21000 438697</u>	vany were filed on $10/6/21$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	
The new name must be distinguishable and contain the words "Limited L	Liability 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	no change
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	no change.
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	Julie Ragusa 22259 Woodspring Drive Enter Floridu street address Boca Raton Florida 33428. City Zip Code
New Registered Office Address:	22259 Woodspring Drive Enter Floridu street uddress
	Boca Raton Florida 33428
	City Zip Code

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 = Ma AMBR = Au	nager thorized Member	Address 21 HG 5 PH 1: 41	
Title	<u>Name</u>	Address 21 HS 5 PH 1:41	Type of Action
MGR	Julie Ragusa	22259 Woodspring 1 Boca Raton, FL 334	DRIVE TAdd
		130Cackaron, PC 537.	□Remove
			□ Change
			□Add
			☐ Remove
			□ Change
			□Add
		·	□Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
			□ Add
	<u>.</u>		□Remove
	, , , , , , , , , , , , , , , , , , ,		☐ Change
			□Add
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			□Change
			□Add
			□Remove
			□ Change

. If amendir	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	I just reeded to add myself as the authorized peison on this
	authorised seison on this
	account
	
(If an effective	tate, if other than the date of filing: (optional) c date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)
	e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
he record spe ord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	November 2. 2021.
_	November 2. 2021. Julie Ragusa
	Signature of a member of authorized representative of a member
	Julie Ragusa

ED11 ED 005.00