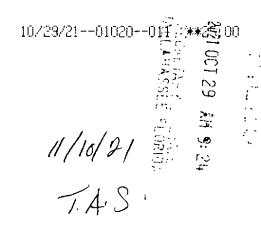


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COVER LETTER

TO:

TO: Registration Se Division of Cor				
South Mian	ni Notary			
SUBJECT:	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Uwan Williams			
		Name of Person		
	South Miami Notary			
		Firm/Company		
	10945 SW 179th st			
		Address		
	Miami, Florida 331257			
		City/State and Zip Code		
	uwanwilliams@gmail.com			
	E-mail address: (to be used for future annual report i	notification)	
For further information c	oncerning this matter, please c	all:		
Uwan Williams		405 441-0079		
Name o	f Person	at () Area Code Day	time Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address		Street Address		
Registration Section Division of Corporations		Registration Division of O		
P.O. Box 6327		The Centre o	The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Mor	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

South Miami Notary		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records. da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on October 18, 2021	and assigned
Florida document number L21000452752	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited 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 ADD	RESS)	3 8
		F 12 13
		20
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		27 27
B. If amending the registered agent and/or registero agent and/or the new registered office address here:	ed office address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida street address	
	Flori	ida
	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 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
MGR	Uwan Williams	10945 SW 179th st, Miami FL 33157	🗀 Add
			□Remove
		MGR to AMBR	⊞ Change
			_______\Add
			Change Change Add 29
			70 Add 29
			Remove DChange
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			[]Change

Effective date, if other than the date of filing: If an effective 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The 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 rid is filed. Dated October 25th, 2021 When J. When Signature of a member or authorized representative of a member Uwan Williams			
Effective date, if other than the date of filing:			
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Effective date, if other than the date of filing:			
Effective date, if other than the date of filing: (optional) If an effective 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The 90th day after the rd is filed. Dated October 25th, 2021 What I willow. Signature of a member or authorized representative of a member	<u></u>		P C
Effective date, if other than the date of filing:			
Effective date, if other than the date of filing:			
If an effective 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The 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 ord is filed. Dated			
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Dated October 25th, 2021 Class J. W. Classe. Signature of a member or authorized representative of a member	If an effective of Note: If the	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after date inserted in this block does not meet the applicable statutory filing requirements, t	ler filing.) Pursuant to 605.0207
		cifies 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	October 25th, 2021.	
	_	Signature of a member or authorized representative of a member	
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Filing Fee: \$25.00