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SEP 2 9 2022 3. PRATHER

COVER LETTER

TO: Registration Division of	n Section Corporations	•	
SUBJECT:	Sandra L Name of Lim	Meyer LLC.	
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.	
Please return all cori	respondence concerning this matter	to the following:	
	•		
	Sondra	Name of Person	_
		Name of Person	
		Firm/Company	_
		Riversde Dr # 505 Address	_
	Dompuro	Bouch 1-L 33062	_
	B-mail address:	Bouch 1-4 33002 City/State and Zip Code (a Q q ma. 1. c m to be used for future annual report notification)	
For further informat	ion concerning this matter, please co		
	-		
Sondia	Meyer	at (S16) 260-0971 Area Code Daytime Telephone Numb	
N:	ame of Person	Area Code Daytime Telephone Numb	er
Enclosed is a check	for the following amount:		
₹ 25.00 Filing F	ee S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy (al copy is enclosed)
Division P.O. Box	ion Section of Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sondra L Myer	Consulling L	LC = 2
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on ou Liability Company)	r records.)
The Articles of Organization for this Limited Liability Company Florida document number 42/0000/7261	were filed on	aind assigned F
This amendment is submitted to amend the following:		4 9: 22 TANTA TORIDA
A. If amending name, enter the new name of the limited liab	ility company here:	÷. 19
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Sanc	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records	s, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stre	et address
		ri
	City	, Florida 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
<u>.</u>			□Add
			□Change
		Remove	
			Change
			
			□Remove
			□Change
			□Add
		Remove	
			Change
		□Remove	
			Change
			□Add
		□Remove	
		□ Chango	

If amending any other information, enter change(s) here: (Attach additional sheets, if nec	essary.)
	<u> </u>
	<u> </u>
	
Effective date, if other than the date of filing:	filing.) Pursuant to 605.0207
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (brd is filed.) The 90th day after the
	**1
Dated 07/10/2027	2022 ÀLL.
, , , , , , , , , , , , , , , , , , , ,	2022 JUL
Dated 07/10/2027 (Awalus Meyer Signature of a member or authorized representative of a member Meyer Meyer Meyer Meyer Meyer Meyer Meyer Meyer	2022 JUL 5 /