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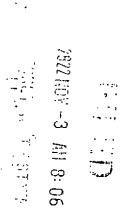
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A. BUTLER
JAN 4 4 2023

#### **COVER LETTER**

	a & Emelaine LLC						
SUBJECT:							
The enclosed Article	s of Amendment and fee(s) are submitted for filing.						
Please return all corre	espondence concerning this matter to the following:						
	Stephanic Goebel						
	Name of Person						
	ZenBusiness Inc.						
	Firm/Company						
	5511 Parkerest Drive, Ste. 103						
	Address						
	Austin, TX 78731						
	City/State and Zip Code						
	fulfilhment@zenbusiness.com						
	E-mail address: (to be used for future annual report notification)						
For further information	on concerning this matter, please call:						
Stephanie Goebel c/o	at ( )						
Nai	ne of Person Area Code Daytime Telephone Number						
Enclosed is a check f	or the following amount:						
\$25.00 Filing Fee	© \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)						

MAILING ADDRESS:

; TQ:

Registration Section
Division of Corporations

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- 2022 NOV -3 All 8: 06

The Articles of Organization for this Limited Liability Company were filed on 12/03/2021 and assigned

Florida document number 1.21000512742

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 "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable: 1317 Edgewater Dr #4670 Orlando, FL 32804

Enter new mailing address, if applicable: 1317 Edgewater Dr #4670 Orlando, FL 32804

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 ad	trass
		Florida
	City	Zip Code

#### New Registered Agent's Signature, if changing Registered Agent:

(Mailing address MAY BE A POST OFFICE BOX)

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Buddha Bouthavy Soumpholphakdy		Add
			□ Remove
		1317 Edgewater Dr #4670 Orlando, FL 32804	■ Change
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Note: li	e date, if other than the da tive date is listed, the date must be the date inserted in this block it's effective date on the Depa	does not meet the application	(opt o date of filing or more than 90 days afte ble statutory filing requirements, th	ional) or filing.) Pursuant to 605.0207 (3) is date will not be listed as the
	rd specifies a delayed e Oth day after the record		an effective time, at 12:01	a.m. on the earlier of:
Dated _	October 28	2022		
	/s/Buddha Soumpholphal			
	Sig	mature of a member or author	ized representative of a member	
	Buddha Soumpholphakdy			
		Typed or printed	name of signee	<del></del>

Page 3 of 3

Filing Fee: \$25.00