## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLP

Account Number : I20160000074 Phone : (407)839-4277 Fax Number : (407)839-4264

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PETER DANIEL CATANZARO, LLC

Certificate of Status	1
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## DocuSign Envelope ID: 33D1E804-497A-408E-B86D-3AB1C6CDF97D CUVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Cor	rporations		
Peter Danie	el Catanzaro, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Peter Catanzaro		
		Name of Person	
Name of Person			
			Address
	Jacksonville, FL 32256		
		-	
		· · · · · · · · · · · · · · · · · · ·	fication)
For further information c	oncerning this matter, please c	all:	
Chip Gray		407 481-5274	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25,00 Filing Fee		Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registration S	Section	Registration Se	
Division of C	Corporations	Division of Cor	porations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Peter Daniel Catanzaro, LLC		
(Name of the Limited Liability Compa (A Florida Limited )	ny as it now appears on our records.) Dability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL21000513697	were filed on December 6, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	141-7-1	)+8 %·
Enter new mailing address, if applicable:		<u>-</u>
(Mailing address MAY BE A POST OFFICE BOX)		
D. If a war directly a share production of a contract and a contract and a file of	address on any year do not on the year	of the new registered
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	our records, enter the hand	SECULIARIASSI
Name of New Registered Agent:		
New Registered Office Address:		<del></del>   '
	Enter Florida street address	PR E.F.C
<del></del>	, Florida	Zip Cose 25
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.

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II antenuing Authorized rerson(s) authorized to inamage, enter the title, name, and address of each person being added
or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Peter Daniel Catanzaro	8258 Shade Tree Ct.	
		Jacksonville, FL 32256	
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			[]Remove
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ecord specifies a delayed effective	date, but not an effective t	ime at 12:01 a.m. on the ea	rlier of: (b) The 90th di	av after th
is filed.	tino, but not all officially t		# <b>4</b>	
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December 14	2021	DocuSigned by:	in skir	<b>A</b>
		Peter Cet	angena 225.	2
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