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## CORPORATE ACCESS, .

## When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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### **COVER LETTER**

COVER DETTER
TO: Registration Section Division of Corporations
SUBJECT: Ducrified
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Signwel R. Cibrune JI.  Name of Person
Uverified LCC Firm/Company
Firm/Company
434) Miller Or.
Address
St. Pete Beach FL 33706  City/State and Zip Code  Sam @ Uverified, net
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scare 1 ( ) 20 20 707 1221
Name of Person  at (813) 787 - 672/  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed) (additional copy is enclosed)
Mailing Address: Street Address:  Registration Section Registration Section
Division of Corporations  Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Uverifi	ed (Did not	file with LLC in norm
(Name of the Limited (A	Liability Company as it now appears on our record Florida Limited Liability Company)	<b>15.</b> )
The Articles of Organization for this Limited Liab Florida document number L2100515		and assigned
This amendment is submitted to amend the follow		2023 SCC
A. If amending name, enter the new name of th		2023 HAY 25 2626 [ASS]
Dugas Carl 116	···-	
The new name must be distinguishable and contain the word	is "Limited 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 A	le:	
	-	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he	stered office address on our records, <u>enter t</u> ere:	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
_	City , Flor	ida
New Registered Agent's Clampanus 16 skt 75		LAP 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 =	Manager	
AMBR =	Authorized	Member

Title	<u>Name</u>	Address	Type of Action
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			Remove
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			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an cffe <u>ote:</u>	ve date, if other than the date of filing:  ctive 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 605.020 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed and it's effective date on the Department of State's records.
ecord is file	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
ated _	5,25,2023.
	Signature of a member or anthorized representative of a member
	Samue) R. Cibrone Jr.

Filing Fee: \$25.00