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03/01/23--01019--006 \*\*25.00



## **COVER LETTER**

TO: **Registration Section Division of Corporations** SUBJECT 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:

Firm/Company

NOMI report notification) AT waa 0 GMAIL COM 10

For further information concerning this matter, please call:

and Bea

Daytime Telephone Number

Enclosed is a check for the 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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF		
	O )RGANIZATION	
	)F	
Ar Wood Rott	iny as it now appears on our records Liability Company)	2023 M//R - 1 PH 3: 43
The Articles of Organization for this Limited Liability Company Florida document number <u>(2220000245)</u> .	were filed on $\frac{12/23/2}{2}$	021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab DF, $Wood$ , $ROF$ , $LLC$ . The new name must be distinguishable and contain the words "Limited Liabi		or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	rida Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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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.

<sup>1</sup> If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

## MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If 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 record is filed.

Dated Merch 1 2023
ABecher
Signature of a member or authorized representative of a member
- Hudrew E. Becker
Typed or printed name of signee

Filing Fee: \$25.00