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FILED 2022 AUG - I PH 3: 34 SECRETARY OF STATE TALLAHASSEE, FL

### **COVER LETTER**

| TO: | <b>Registration Section</b>     |
|-----|---------------------------------|
| `   | <b>Division of Corporations</b> |

| SUBJECT:     | New World Enterprises. LLC                                 | • | ۰<br>۰ | , |
|--------------|--|---|--------|---|
| SUDJEC1:     | 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:

Mike Wakeland Name of Person New World Enterprises, LLC Firm/Company 1165 SE Lake Lane Address Keystone, FL 32656 City/State and Zip Code mike.wakeland0@gmail.com E-mail address: (to be used for future annual report notification) 1022 AUG - 1 PM 3: ECRETARY OF STAT TALLAHASSEE, FL For further information concerning this matter, please call: Mike Wakeland 941 465.1273 at Daytime Telephone Number Name of Person မှု Enclosed is a check for the following amount: m □ \$60.00 Filing Fee, □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & **\$25.00** Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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 FILED

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>12/28/2001</u> and assigned Florida document number <u>L22000005939</u>

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 Liabili | ity Company," the designation "LLC" or the abbreviation "L |
|---|--|
| Enter new principal offices address, if applicable:                         | TALLER AL  |
| (Principal office address MUST BE A STREET ADDRESS)                         | <u>27</u>  |
|   | AT T   |
|   |  |
| Enter new mailing address, if applicable:                                   |  |
| (Mailing address MAY BE A POST OFFICE BOX)                                  | Ā  |

# B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

| Name of New Registered Agent:  | ·                      |            |
|--------------------------------|------------------------|------------|
| New Registered Office Address: | Enter Florida street o | address    |
|                                |                        | _, Florida |
|                                | City                   | 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>       | <u>Address</u>             | Type of Action |
|--------------|-------------------|----------------------------|----------------|
| AMBR         | Wakcland, Mike    | 4317 1st Ave Dr NW         | 🗆 Add          |
|              |                   | Bradenton, FL 34209        | 🗆 Remove       |
|              |                   |                            |                |
| AMBR         | Chamberlain, Adam | 1165 SE LAKE LAKE          | □Add           |
|              |                   | KEYSTONE HEIGHTS, FL 32656 | 🗆 Remove       |
|              |                   | <u> </u>                   | Change         |
| CBDO         | Sharp. Tyler      | 5008 18TH ST W UNIT B      | 🗆 Add          |
|              |                   | BRADENTON, FL 34207        | ■Remove        |
|              |                   |                            | □Change        |
|              |                   |                            | 🗆 Add .        |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: \_\_\_\_\_\_(optional) (If an effective 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 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

| July 21st<br>Dated | 2022   |
|--------------------|--|
| Mh / /             |  |
| Mahul              | White  |
| / /                | Signature of a member or authorized representative of a member |

MICHAJEL WAKELAND

Typed or printed name of signce