122000059626

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates of	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. MATTHEWS MAY 16 2022

COVER LETTER

TO: Registra Division		ection porations		•	
CUDINCT.		nille Horvath, LLC		•	
SUBJECT:	·	Name of Lim	ited Liability Company		
The enclosed Arti	icles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all c	correspo	ondence concerning this matter	to the following:		
		Camille A Horvath			
			Name of Person		
		Camille Horvath, LLC			
			Fim/Company		
		1190 Grand Cayman Drive	:		
			Address		
		Merritt Island, FL 32952			
			City/State and Zip Code		
		camillehorvath@gmail.com			
			to be used for future annual report not	ification)	
For further inforn	nation c	oncerning this matter, please c	all:		
Camille Horvath			321 427-5807 at ()		
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a chec	ck for th	ne following amount:			
■ \$25.00 Filing	; Fee	☐ \$30.00 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</u> Pagistr			Street Address:	action	
Registr Divisio		orporations	Registration Section Division of Corporations		
P.O. Bo	ox 632	7	The Centre of	-	
Tallaha	issee, F	FL 32314	2415 N. Monro	be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION CRETARY OF STATE OF OF

22 APR 15 PM 3= 08

Camille Horvath, LLC			
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	02/03/22	and assigned
Florida document numberL22000059626	<u>_</u> .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the des	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	ESS)	· .	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
maning address with 122 11 1 ODI (7) 1 1 CO 1001.			
B. If amending the registered agent and/or registered	office address on our rec	cords, enter the nar	ne of the new registe
igent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
How Registered Office Address.	Enter Floria	la street 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 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>	Name	Address	Type of Action
AMBR	Camille A Horvath	1190 Grand Cayman Dr. Merrritt Island, FL 32952	■Add
			□Remove
			□ Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
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Services offered: Re	al Estate Sales					
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fective date, if other t	han the date of fil	ing:	02/03/22		(optional)	
n effective date is listed, the ote: If the date inserted is						
cument's effective date				y ming require	ments, this date i	viii iksi be nated da
ecord specifies a delayed	effective date, but r	not an effective	time, at 12:01	a.m. on the ca	rlier of: (b) The	90th day after the
is filed.						
		2022				
ted February 3rd		_, 2022	·			
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		~ ()			<i>D</i> 1	
- 	Similaria	alle 1	Marizad reserve	ntative of a man	voc bor	-
	Signature of	a member or aut	norized represe	ntative of a men	aber	

Filing Fee: \$25.00