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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

	Registration Se Division of Cor			
6110 IE		NCHEZ LLC		
SUBJEC	-I; <u> </u>	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		RODNEY S WHITE CPA		
			Name of Person	
		RODNEY S WHITE CPA		
			Firm/Company	 -
		4650 LIPSCOMB ST NE.	SUITE 20	
			Address	•
		PALM BAY FL 32905		
			City/State and Zip Code	
		rodwhitecpa@earthlink.net	to be used for future annual report not	ification)
For furth	ner information c	oncerning this matter, please of	_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	S White CPA		321 728-9366	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed	l is a check for th	ne following amount:		
	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)
	Mailing Address Registration 5 Division of C	Section	Street Address: Registration So Division of Co	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 13 PM 12: 57

MM&D SANCHEZ LLC

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

(A Florida Limited Liability Company)

[ALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on 02/04/2022 and assigned Florida document number ______L22000061943 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 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 ADDRESS) 4651 W EAU GALLIE BLVD LOT #82 Enter new mailing address, if applicable: MELBOURNE FL 32934 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

Enter Florida street address

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>	Address	Type of Action
AMBR	SANCHEZ MAGDALENO, LUIS	173 SAN JUAN CIRCLE	□Add
		MELBOURNE FL 32935	≣Remove
			□Change
AMBR	SANCHEZ MAGDALENO, SOLE DAD	173 SAN JUAN CIRCLE	□ Add
		MELBOURNE FL 32935	■Remove
AMBR	PEREZ CRUZ, DINA	4651 W EAU GALLIE BLVD LOT #82	= Add
		MELBOURNE FL 32934	□Remove
			□ Change
			🗆 Add
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Effective date, if other than the fan effective date is listed, the date in this Note: If the date inserted in this document's effective date on the	block does not m	neet the applicat	date of filing or mode statutory filing	(optione than 90 days after g requirements, this	onal) filing.) Pursuar s date will not	nt to 605.020° be listed as
record specifies a delayed effect d is filed.	tive date, but not	an effective tim	ie, at 12:01 a.m. c	on the earlier of: (b) The 90th d	lay after the
MAY 7		2022				
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Filing Fee: \$25.00