L22000091593

(Requestor's Name)
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(Business Entity Name)
(Document Number)
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100418527641

11/06/23--01025--021 ++25.00

COVER LETTER

TO: Registration S Division of Co				
PHIL DOX	NNA LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspond	ondence concerning this matter	to the following:		
	CHAMBERLAIN, PHILL	.1P		
		Name of Person		
		Firm/Company		
	1506 SAN DIEGO ST SE			
		Address		
	PALM BAY, FL 32909			
		City/State and Zip Code		
	dmellowphil@gmail.com	to be used for future annual	report notification)	
For further information of	concerning this matter, please e		repartitionicality	
CHAMBERLAIN, PHI	LLIP	347 56	4-4126	:>1
Name 6	of Person	at () Area Code	Daytime Telephone Number	
Enclosed is a check for t	he following amount:			1
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end	Certificate closed: Certified (e of Status & 📜
Mailing Addre Registration	Section	_	ration Section	
Division of C P.O. Box 633			on of Corporations of Tallahassee	
Tallahassee,	FL 32314		!. Monroe Street, Suite 81 assee, FL 32303	0

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PHIL DONNA LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on 02/08/2023	and assigned
lorida document number L22000091593	·	
his amendment is submitted to amend the following:		-2
. If amending name, enter the new name of the lin	nited liability company here:	,- • -
		;
he new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD.		<u> </u>
THICIPAL OFFICE MALLESS STOST DE ASTREET ADD		
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registere	ed office address on our records, enter th	ie name of the new regis
gent and/or the new registered office address here:		
- · · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Florida street address	
	. Flori	ida
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	RASHIDA CHARLES	1506 SAN DIEGO ST SE	■Add
		PALM BAY, FL 32909	□Remove
			ClChange
AMBR	ABIGAIL CHAMBERLAIN	3 PINNEY ROAD	
		BLOOMFIELD, CT 06002	□Remove
			Change
			QAdd
			□Remove
			l . Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
		□Add	
			⊡Remove
			□Change

ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cumot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 botte: If the date inserted in this block does not neet the applicable statutory tiling requirements, this date will not be listed occurrent's effective date on the Department of State's records. 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 is filed. NOVEMBER 1 2023 The Man Land Signature of a member or authorized representative of a member	_		
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Filing Fee: \$25.00