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2022 OCT -7 MILIO: OC SECRETARY OF STAT

COVER LETTER

Registration Section Division of Corporations

TO:

PLANET I	ENTERPRISES LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	John Hallock			
		Name of Person		-
	PLANET ENTERPRISES	LLC		
		Firn/Company		_
	8892 LIVINGSTON WAY	<i>(</i>		- 3
		Address		
	BOYNTON BEACH, FL	33472		2022 OCT -7 AM IO: 03 SECRETARY OF STATE STALL WHY SEE, FIL
		City/State and Zip Code		一类
	bobby.hallock1981@gmail			SS 3
	E-mail address: (to be used for future annual report noti	fication)	EN ST
For further information of	concerning this matter, please c	all:		FIE D3
John Hallock		717 587-0577 at ()		
Name o	of Person		e Telephone Number	r
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certified	ite of Status &
Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations allahassee	10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLANET ENTERPRISES LLC	_	
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Compan Florida document number L22000106564	y were filed on 03/01/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	sility Company "the designation "LLC"	or the abbreviation "LLC"
	mity company. The designation (150)	of the above viation (b.E.C.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		
		2022 OF SECR
Enter new mailing address, if applicable:		rii
Mailing address MAY BE A POST OFFICE BOX)		7 'r
		767
		199 A
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter th	
The second of th		်ာက် ယ
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
· ·	, Flor	
	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
MGR	ONE STRANGE CHERRY LLC	6814 HOULTON CIRCLE	
		LAKE WORTH, FL 33467	■Remove
			□Change
			□Add
			□Remove
			□Change
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			Remove SHOCKETAL Change Adda Adda Adda
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ective date, if other thar effective date is listed, the dat	the date of filing must be specific and	g:d cannot be prior to	date of filing or m	ore than 90 days after	onal) filing.) Pursuant to 60	5.0207
te: If the date inserted in the ument's effective date on the	iis block does not r	neet the applical	ole statutory filin	g requirements, this	date will not be lis	ted as
	·					
cord specifies a delayed eff s filed.	ective date, but not	t an effective tim	ic, at 12:01 a.m. o	on the earlier of: (b) The 90th day afte	er the
October 3rd		2022				
	0 -	•	_ ·			
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Typed or printed name of signee