L22000 118992

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JIVISION OF CORPORATION

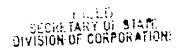
T. MATTHEWS APR 12 2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Mirs Paradia	ce LLC
	Liability Company
The enclosed Articles of Amendment and fee(s) are submit	ted for filing.
Please return all correspondence concerning this matter to t	he following:
_ Courtner	Name of Person
Mis Pa	Firm/Company
1814 MOOC	Cactus Ct Address
- busico	FL 33570 City/State and Zip Code
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, please call:	
Courthey Aborton Name of Person	at (20) 978-2183 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section	Street Address: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**



Mics Paradi	ce (15	22 MAR 28 AM 8: 23
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears o nited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Com Florida document number <u>L22000 118992</u> .	pany were filed on	182022 and assigned
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 design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our reco	rds, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	street address
		. Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	gent:	

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>	Address	Type of Action
mil	Lynnae williams	Robinisto Man Cactur Ct	□Add
		huskin FL 33570	Remove
			□Change
MGR	Courtney Acouse	n 1816 man cacturet	Z ∕Add
		huskin FL 33570	□Remove
			□Change
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ecifies a delayed e	ffective date, b	ut not an ef	fective tir	ne, at 12:0	l a.m. on th	e earlier (of: (b) Th	ie 90th day a	fter the
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,	e date is listed, the da ne date inserted in s effective date on	re date is listed, the date must be specified date inserted in this block does a effective date on the Department ecifies a delayed effective date, but the Department of the	re date is listed, the date must be specific and cannot date inserted in this block does not meet to seffective date on the Department of State's recifies a delayed effective date, but not an electric and cannot delayed effective date.	re date is listed, the date must be specific and cannot be prior to the date inserted in this block does not meet the applicate a effective date on the Department of State's records. Robinsolution	re date is listed, the date must be specific and cannot be prior to date of file to date inserted in this block does not meet the applicable statuto is effective date on the Department of State's records.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the Signature of a member of authorized recentative of a	edate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days ne date inserted in this block does not meet the applicable statutory filing requirement is effective date on the Department of State's records. ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of Signature of a member of authorized representative of a member.	The date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing ne date inserted in this block does not meet the applicable statutory filing requirements, this date is effective date on the Department of State's records. The date inserted in this block does not meet the applicable statutory filing requirements, this date is effective date on the Department of State's records. The date inserted in this block does not meet the applicable statutory filing or more than 90 days after filing need to be date of the proof o	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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be seffective date on the Department of State's records. ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a signature of a member of authorized frepresentative of a member