## 122000120073

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| Zip/Phone #)          |
| WAIT MAIL             |
| ntity Name)           |
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| ertificates of Status |
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Office Use Only



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04/21/22--01008--001 ++25.00



T. MATTHEWS

JUN - 6 2022

## **COVER LETTER**

|                  | Registration Se<br>Division of Co |   |   |   |
|------------------|-----------------------------------|---|---|---|
| eunire           | /w-                               | SNOYS LLC                                       |   |   |
| SUBJEC           | T:                                | Name of Lin                                     | nited Liability Company   |   |
| The enclo        | sed Articles of                   | Amendment and fee(s) are sub                    | omitted for filing.   |   |
| Please ret       | urn all correspo                  | ondence concerning this matter                  | to the following:   |   |
|                  |                                   | Stephanie Goebel                                |   |   |
|                  |                                   |   | Name of Person  |   |
|                  |                                   | Zen Business                                    |   |   |
|                  |                                   |   | Firm/Company  |   |
|                  |                                   | 5511 Parkerest Drive, Ste.                      | 103   |   |
|                  |                                   | <del>_</del>                                    | Address   |   |
|                  |                                   | Austin, TX 78731                                |   |   |
|                  |                                   |   | City/State and Zip Code   |   |
|                  |                                   | fulfillment@zenbusiness.co                      | эт<br>to be used for future annual report notif                           | Employa )   |
| For furthe       | r information c                   | roncerning this matter, please c                | •   | ication)  |
| Stephanic        | ephanie Goebel 844 493-6249       |   |   |   |
|                  | N'ame o                           | f Person  | at ()   | : Telephone Number  |
| Enclosed         | is a check for th                 | he following amount:                            |   |   |
| <b>\$</b> \$25.0 | 0 Filing Fee                      | ☐ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|                  |                                   |   |   |   |

MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT

## ARTICLES OF ORGANIZATION DECRETARY OF STATE OF MYISION OF CORPORATIONS

22 APR 21 AM 11: 27

NOISE ANNOYS LLC

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

| The Articles of Organization for this Limited Liabil Florida document number 1.22000120073  |  | 03/09/2022   | and assigned                               |
|---|--|--|--|
| This amendment is submitted to amend the following  | ug:  |  |  |
| A. If amending name, enter the new name of the  | limited liability company  | <u>/ here</u> :                                    |  |
| The new name must be distinguishable and contain the words  | "Limited Liability Company," th  | ne designation "LLC" or the a                      | bbreviation "L.L.C."                       |
| Enter new principal offices address, if applicable  | ::   |  |  |
| (Principal office address MUST BE A STREET A  | DDRESS)  |  | <del></del>                                |
|   |  |  |  |
| Enter new mailing address, if applicable:   |  |  |  |
| (Mailing address MAY BE A POST OFFICE BO)   | <u></u>  |  |  |
| B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:   |  | on our records, enter                              | the name of the new                        |
| New Registered Office Address:  |  |  |  |
| New Registered Office Address.  Enter Florida street address  |  |  |  |
| _   |  | Florida  |  |
| Nam Desirenced Asset Company of the Company   |  |  | Zip Code                                   |
| New Registered Agent's Signature, if changing Regis   |  |  |  |
| I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as registered being filed to merely reflect a change in the registery company has been notified in writing of this change. | nd complete performance<br>ed agent as provided for i<br>stered office address, I he | of my duties, and I am<br>In Chapter 605, F.S. Or, | familiar with and<br>, if this document is |

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> | <u>Name</u>    | Address   | Type of Action |
|--------------|----------------|---|----------------|
| AMBR         | Joseph Mhassel | 500 N Congress Ave C309<br>Defray Beach, FL 33445 | ■ Add          |
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| Effective date, if other than the If an effective date is listed, the date in Note: If the date inserted in this between the Note of the If the date inserted in this between the Note of the If the date inserted in this between the If | e date of filing:  ust be specific and cannot be proposed door not most the app | ior to date of filing or mo | (optional) ore than 90 days after filing.) P | ursuant to 605,0207                   |
| document's effective date on the   |   |                             | requirements, this date wi                   | n not be fisted as                    |
| he record specifies a delaye<br>The 90th day after the re  |   | not an effective ti         | me, at 12:01 a.m. or                         | the earlier of                        |
| Dated April 12   | 2022  |                             |  |                                       |
|  |   |                             |  |                                       |
| /s/ Francisco Jaran  |   |                             |  |                                       |
| /s/ Francisco Jaran  | Signature of a member or au   | thorized representative     | of a member                                  | <del></del>                           |

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Filing Fee: \$25.00