L22000134297

(Requ	uestor's Name)	
(Addr	ess)	
(Addi	ess)	
(City/	State/Zip/Phone	9 #)
☐ PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
•		
(Doci	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



900388157279

05/25/22--01014--005 **30.00

LLAHASSEE FLOR

22 MAY 25 PH 12: 07

2022 HAY 25 PH I2: 28

of 5/25/2622

COVER LETTER

Division of Corporations	
SUBJECT:	Name of Limited Liability Company
	Name of Limited Liability Company
The enclosed Articles of Amendment and	fee(s) are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
Ŀ,	Inmlyssia Baca
<i>,</i>	Mizz LADYZ LLC /TMEC
123	5 Chee Lane
Talla	hassee FL 3230 4
2 mizz	City/State and Zip Code Llady 2 @ 5th 9tr t 2 com mail address: (to be used for future annual report notification)
For further information concerning this ma	
Annalyssia Be	at (850) 692-1308 Area Code Daytime Telephone Number
Enclosed is a check for the following amo	unt:
□ \$25.00 Filing Fee X\$30.00 Fili Certificat	ing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) 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

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 MAY 25 PH 12: 29

(Name of the Limited Gabilety Company as it now appears on our records.) (A Horda Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on	$\Lambda\Lambda$				52 LUIS: 58
The Articles of Organization for this Limited Liability Company were filed on	//lizz (ladu'z	LLC	SEI	ir: STATE
The Articles of Organization for this Limited Liability Company were filed on	(Name of the Limite	d Liability Compar A Florida Limited L	ny as it now appears on or invited the control of t	ur records.)	ten mi ssee, fü
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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 12.5 Chee Lane Enter Florida street address	The Articles of Organization for this Limited Lia	ibility Company	were filed on	3/17/20	2 and assigned
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: New Registered Office Address: 13.5 Chee Lane Enter Floridu street address	This amendment is submitted to amend the follo	wing:			
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 Office Address: A 35 Chee Lane	A. If amending name, <u>enter the new name of</u>	the limited liabi	lity company here:		
Enter new mailing address, if applicable: (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 Office Address: A.S. Chee Lane	The new name must be distinguishable and contain the wo	ords "Limited Liabili	ty Company," the designat	ion "LLC" or the a	bbreviation "L.L.C."
Enter new mailing address, if applicable: (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 Office Address: A 35 Chee Lane	Enter new principal offices address, if applica	ible:			
(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 Office Address: A 35 Chee Lane	(Principal office address MUST BE A STREE)	TADDRESS)			
(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 Office Address: A 35 Chee Lane					
(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 Office Address: A 35 Chee Lane	Enter new mailing address, if annlicables				
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 Office Address: 135 Chee Lane	•	3 <i>0X</i>)			
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: 35 Chee Lane Enter Florida street address					
New Registered Office Address: 235 Chee Lane Enter Florida street address			ddress on our record	s, <u>enter the nar</u>	me of the new registered
Enter Florida street address	Name of New Registered Agent:	Annalys	ssia Bac	ca	
Tallahassee Florida 32304	New Registered Office Address:	1235	Chee La Enter Florida sir	N C cet address	
Cay Zip Coae		Talla	<u>hassee</u>	Florida	32304 Zup 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 Agnature 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>	Name	Address	Type of Action
MGR	Annalyssia Baca	1235 Chee lane	DC Add
	·	Tallahassee, FL 3230	
			□Change
AMBR	Alyssianna Baca	146 Myers Creek D	C XAdd
	v	Hopkins, SC 2906	□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change

_	
_	
_	
-	
-	
_	
_	
_	
_	
-	
-	
_	
Note:	ve date, if other than the date of filing:
e record rd is fil	d 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 ed.
Dated _.	5/18 / 22 May 18. 2022.
	Signature of a member of authorized reproductive of a member Annalyssia Baca Typed or printed name of signee

Filing Fee: \$25.00