## 122000210578

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



200388609102

06/02/22--01019--013 \*\*30.00

2022 JUN -3 PM 1:21
SECHE FARY SEE STATE

## COVER LETTER

TO:

**Registration Section** 

Division of Co	rporations		
D.G.L.B. I. SUBJECT:			
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omittad for filling	
	·	-	
Please return all correspo	ondence concerning this matter	to the following:	
	DIEGO RUIZ		
		Name of Person	
	MASTER PROFESSION.	AL TAX	
		Firm/Company	
	3900 S. GOLDENROD R	D SUITE 112	
		Address	· · · · · · · · · · · · · · · · · · ·
	ORLANDO FL 32822		
		City/State and Zip Code	
	INFO@MASTERTAXES.		
For further information c	n-mail address: (	to be used for future annual report no all:	dification)
DIEGO RUIZ	, promo t		
		at () _	
Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		Street Address: Registration So	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, I	L 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

FILED

2022 JUN -3 PM 1: 2.1

D.G.L.B. LLC

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

(A Florida Limited Liability Company)

		THAMASSEE, FILL
The Articles of Organization for this Limited Liability Company	were filed on MAY 5, 2022	and assigned
Florida document number 1.22000210578		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" o	r the abbreviation "L.L.C."
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)		
3. If amending the registered agent and/or registered office adequate and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
gen unasor the new registered office address here:		
Name of New Registered Agent:		
		<u> </u>
New Registered Office Address:	Enter Florida street address	
	timer Fibrida street daaress	
<del>-</del>	, Floric	laZip Code
New Registered Agent's Signature, if changing Registered Agent:	~~y	ър соае

## 1

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
MGR	HILL CATEDRAL LLC	3900 S GOLDENROAD RD STE 112 ORLANDO F	L ≣Add
			□Remove
		<u> </u>	_ □Change
MGR	DIEGO A RUIZ	10278 SPRING SHORE DR WINTER GARDEN FL	3 ■Add
		<del></del>	_
			_ □Change
			_ 🗆 Add
			_ DRemove
			_ □Change
<del></del>			_ □Add
			_ □Remove
			_ Change
			_ 🗆 Add
			_ 🗆 Remove
			_ DChange
<del></del> _			_ □Add
			_ 🗆 Remove
			□Change

		<u> </u>		
		<del>-</del>	<u> </u>	
			<del>-</del>	
<u></u>				
		<del></del>		
	<del>-</del>			
				<b>ہ</b> ے
				22.
	-			2
- HE VILLE THE				S P
		·		SSE
	<u>_</u>			TY 7.
				m
		<u> </u>		
	<del></del>			
ee				
ffective date, if other than the an effective date is listed, the date me ote: If the date inserted in this be	e date of filing: ist be specific and cannot b	ne prior to date of filing	or more than 90 days a	otional) iter filing.) Pursuant to 605.02
ote: If the date inserted in this becument's effective date on the I	TOOLS HOUSE HOLL HICCE THE	approcaute Statutory	filing requirements,	this date will not be listed
record specifies a delayed effecti is filed.	ve date, but not an effec	ctive time, at 12:01 a	i.m. on the earlier of:	(b) The 90th day after th
William.				
ated MAY 19	2022			
	·	· · ·		

Typed or printed name of signee

. . . .