L22000211066

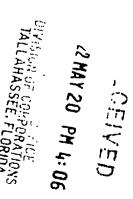
(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE



A. BUTLER MAY 2 3 2022

(850) 524-54372			
(850) 524-6243			
Please use funds from this account: 120 Authorization Signature:			
<u>D&D88 Delivery</u> <u>L2200021</u>	1066		
Business Name	Document Number, (if known):		
Walk in	Will wait		
Certified Copy of the Articles			
Certificate of Status			
NEW FILINGS	<u>AMENDMENTS</u>		
Profit Not for Profit Limited Liability Domestication INC	XAmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/WithdrawalConversion		
OTHER - Corp	Merger		
OTHER FILINGS	REGISTRATION/OUALIFICATIONS		
Annual Report	Foreign Filing		
Fictitious Name	Partnership Reinstatement CORRECTION for a Foreign LLC		
_ Statement of Authority			
	Domestication of a Foreign Corp.		
APOSTIL () COUNTRY	Other		
	EVAMINED'S INITIALS.		

FLORIDA CAPITAL COURIER SERVICES, INC.

2330 CLARE DRIVE

TALLAHASSEE, FL 32309

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 HAY 20 AM 8: 30 Company as it now appears on our records it Cric 1811 Y imited I lability Company) TALL Affect /2 , 2022 and assigned The Articles of Organization for this Limited Liability Company were filed on _ Florida document number <u>L. 22-0002110 le le</u> 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 designation "LLC" or 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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, Signature of New Registered Agent

Enter Florida street address

. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person-being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Darrell Cilyan	818 Lewery St. Dayton, B. h.	1114 F- XUU
			CRemove
			[] Change
			□Add
			□Remove
			©Change
			①Add
			□Remove
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			□Remove
			□Change

-		
(If an effective Note: If th	date, if other than the date of filing: e 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 605 he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listest effective date on the Department of State's records.	
ne record sport is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the
Dated	May 20, 2022.	
	Paralle Signature of a member or authorized representative of a member	

Filing Fee: \$25.00