L22000237326

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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TAISICK OF SOME OF WINDING

COVER LETTER

FO: Registration Sec Division of Corp				
SUBJECT: MOS	t Known No	pody LLC		
	Name of Lim	ited LiaBility Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspor	ndence concerning this matter	to the following:		
	<u>Dec</u>	Name of Person		
	Most	Known Nobody W	<u></u>	
	575 COKYE	af Plantation PKV	y unit#51a	22
		Address		SEP
	<u>oranue far k</u>	FL 32065 City/State and Zip Code		<u> </u>
		Cover to be used for fitture annual report notification		22 SEP 15 PM 2: 17
For further information co	oncerning this matter, please co	all:		17
Derian Fr Name of	ACYA Person	at (<u>904</u>) <u>778 - 1</u> Area Code Daytimo	766 Telephone Number	
Enclosed is a check for the	e following amount:			
∑ \$25,00 Filing Fee	S30.00 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	
Mailing Address Registration S Division of Co	ection	Street Address: Registration Sec Division of Cor		

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 TO ARTICLES OF ORGANIZATION OF

(A Florida Limited Li	<u>y as it now appea</u> ability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company vi Florida document number	vere filed on	5/24/2002	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company h	ere:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the o	designation "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applicable:	NIA		
(Principal office address MUST BE A STREET ADDRESS)			22
			38
			9 K
Enter new mailing address, if applicable:	AVA		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	idress on our r	records, <u>enter the name o</u>	f the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida street address	
	, Florida		
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of covided for in (f my duties, and I am fam Chapter 605, F.S. Or, if t	iliar with and his 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>	<u>Address</u>	Type of Action
MGR	Derivan Fraga	575 Oakleuf Mantation	PKUY Unit 512 Add
			□ Remove
			□Change
			□Add
			□Remove
			Change Colors
			<u></u>
			□ Reprove : ::
			□Add
		□Remove	
			☐ Change
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		•••	□Change
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			□Change

N/A		
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	SEP	
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	7	`.
Iffective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier d is filed.	of: (b) The 90th day after	r the
Dated September 9th 2022.		
X Induce Signature of a member or authorized representative of a member		
Andre Wiggins Typed or printed name of signee		

Filing Fee: \$25.00