h22000244 121

| (Re | equestor's Name) | |
|-------------------------|----------------------|-----------|
| · | , | |
| (Ad | ldress) | |
| | | |
| (Ad | ldress) | |
| | | |
| (Cit | ty/State/Zip/Phone # | f) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Name | e) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| L | | |

Office Use Only



300389429803

06/15/22--01011--020 **25.00

FILED 1022 JUN 15 AM 7:27 EGRETARY SE STATE

A. BUTLER

SEP - 2 2022

COVER LETTER

| TO: Registration S Division of Co | | | |
|--------------------------------------|---|--|---|
| SUBJECT: NOT | FOR GRABS Name of Lim | LLC ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | Januesha S | An ders Name of Person | |
| | | Firm/Company | |
| | 15961 Prickly | PearTerr-Apt. 2 | 03 |
| | Odessa, Fl | 33556 City/State and Zip Code Cody g mai i Com to be used for future annual report no | |
| | nof for grabsll | L & gmai i. com | |
| For further information of | ri-man address: (i concerning this matter, please co | | offication) |
| Juna es ha | Sunders | at (<u>347)</u> <u>359</u> Area Code Dayti | re Telephone Number |
| Enclosed is a check for t | he following amount: | | |
| € S25.00 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) |
| | | | |

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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**

| 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 "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 agent and/or the new registered office address here: Name of New Registered Agent: | NOT FOR GRABS | FILED |
|---|---|--|
| 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 "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 agent and/or the new registered office address here: Name of New Registered Agent: | (Name of the Limited Liability Co | ompany as it now appears on 2007 Pechets. 5 AM 7: 28 |
| 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 agent and/or the new registered agent and/or the new registered Agent: Name of New Registered Agent: | The Articles of Organization for this Limited Liability Comp Florida document number <u>L 22 000344121</u> . | pany were filed on May 30 Jobs SEC. FL |
| 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 agent and/or the new registered address here: Name of New Registered Agent: | This amendment is submitted to amend the following: | |
| 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: | A. If amending name, enter the new name of the limited | liability 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: | The new name must be distinguishable and contain the words "Limited | Liability Company," the designation "LLC" or the abbreviation "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: | Enter new principal offices address, if applicable: | 401 East Jackson Street |
| 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: | (Principal office address MUST BE A STREET ADDRES. | s) Suite 2340 |
| (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: | | Tampa, FL 33602 |
| 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: | Enter new mailing address, if applicable: | |
| Name of New Registered Agent: | (Mailing address MAY BE A POST OFFICE BOX) | |
| • | | fice address on our records, enter the name of the new registered |
| Now Registered Office Address: 401 East Jockson Street Suite 2340 | · · · · · · · · · · · · · · · · · · · | |
| Enter Florida street address | New Registered Office Address: 401 | East Tockson Street Suite 2340 Enter Florida street address |
| Tampa Florida 33 402 | | ampa Florida 33602 |

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 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 |
|--------------|-------------|---------|----------------|
| | | | □ Add |
| | | | □Remove |
| | | | □Change |
| | | | |
| | | | □Remove |
| | | • | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | |
| | | | □Add |
| | | | □Remove |
| | | | ☐ Change |
| | | | 🗖 Add |
| | | | □Remove |
| | | | □Change |

| | , | | - | - | | | <u></u> |
|---|--|---|--|---|--|--------------------------------|---|
| | | | | | | | |
| | | | | | | | |
| | | | | | | <u>.</u> | |
| | | | | | | | |
| | | | | - | | | |
| | | , | <u> </u> | | | | |
| | | <u> </u> | | | | | |
| | | | | - <u>.</u> | | | |
| | *** | - | - | | | | |
| | | | . | | | | |
| | | | | | | | |
| | | | | | | | |
| - | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | <u> </u> | · |
| ithor than the dat | a of filina | , · | | | lant | tianal) | |
| isted, the date must be s serted in this block (| specific and does not m | cannot be pri- | icable statut | iling or more t tory filing re | han 90 days afte | er filing.) Pursua | int to 605.0207 of he listed as t |
| delayed effective dat | te, but not | an effective | time, at 12: | 01 a.m. on tl | ie earlier of: (| (b) The 90th | day after the |
| June 9 | | 202. | <u> </u> | | | | |
| | Jar | | | | | | |
| Sign | ature of a n | hember or aut | horized repre | sentative of a | member | | |
| | other than the date isted, the date must be asserted in this block we date on the Depart delayed effective date. | other than the date of filing isted, the date must be specific and iscreted in this block does not more date on the Department of Standard effective date, but not have the date of the delayed effective date. | other than the date of filing: isted, the date must be specific and cannot be priserted in this block does not meet the applice date on the Department of State's record delayed effective date, but not an effective | other than the date of filing: isted, the date must be specific and cannot be prior to date of particular in this block does not meet the applicable stature date on the Department of State's records. delayed effective date, but not an effective time, at 12: | other than the date of filing: Steed, the date must be specific and cannot be prior to date of filing or more the serted in this block does not meet the applicable statutory filing record date on the Department of State's records. Application | other than the date of filing: | other than the date of filing: (optional) (optional) (sted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursus serted in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records. (delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th (DDA) |