L22 000 246 915

(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



900397027839

11/02/22--01008--018 **25.00

2022 NOV -2 PH 3 40
SECRETARY OF STATE
TALLAH/ASSEE

COVER LETTER

TO: Registration So Division of Co			•
SUBJECT: SOC	1ety Talent Name of Lim	Management U	<u>C</u>
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	GIOVANN	IRENE	
		Name of Person	
	<u></u>	Firm/Company	
	420 CUH	-er court	
	ORLANDO GIO & COUR	City/State and Zip Code + Street Concepto be used for future annual report notified.	ets com
For further information of	concerning this matter, please ca		
	<u>-</u>	at (<u>954</u>) <u>552</u> - Area Code Daytime	5/72 e Telephone Number
Enclosed is a check for t	he 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)

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

(Name of the Limited Liabi	ility Company as it now appears on our records.) da Limited Hability Company)
The Articles of Organization for this Limited Liability Florida document number 422000 246915	Company were filed on $\frac{5}{27}/22$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Li	mited 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 ADD	ORESS)
Enter new mailing address, if applicable:	1
(Mailing address MAY BE A POST OFFICE BOX)	(0. 2)
D 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ed office address on our records, enter the name of the new registered
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	ed office address on our records, enter the name of the new registered:
	SSE P
Name of New Registered Agent:	ب اسلام کی است
New Registered Office Address:	ATE TL
	Enter Florida street address
<u></u>	
	City Zip 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 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
MBR	GIOVANNI CENE	420 cutter court	<u></u> ≌∕∧dd
		ORLANDO, FL 32835	□ Remove
			□Change
AMBR	DACE COHEN	13928 Tahiti Way	□Add
		4 31	Remove
		MARINA DEL Rey, CA 902	92 □Change
			🗆 Add
			🗆 Remove
			□Change
			□Add
			Remove
		 	□Add
			□Remove
			□Change
			□Add
			Remove
			□Change

	<u> </u>									_
										_
					<u>-</u>		<u>. </u>			_
							· !			
					<u> </u>		<u> </u>			_
										_
								_ .		_
										_
									-	_
			_	_						_
					<u> </u>					
					<u>-</u>					
			_							
	<u></u>	-			-					
-		<u></u>						<u>.</u>		_
						<u> </u>				_
										_
reffectiv <u>te:</u> If th	date, if other to date is listed, the date inserted is effective date.	e date must be in this block	specific and o does not me	cannot be pri eet the appl	ior to date of t licable statu	iling or more		after filing.		
cord spe s filed.	ecifies a delayed	l effective da	te, but not a	ın effective	time, at 12:	:01 a.m. on t	he earlier c	f: (b) Th	e 90th day af	ter the
ed	October	216		202	<u> 22</u> .					
		/~								
		- Sim	Sature of a m	ember or ou	thorized repr	esentative of	a member			