

(Req	uestor's Name)	
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PICK-UP	WAIT MAIL	
(Busi	iness Entity Name)	
(Doc	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to F	iling Officer.	
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	Q. SILAS	
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Office Use Only



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SECRETARY OF STATE

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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: LUCYE	house 4718 Name of Limit	- 4721B LLC led Liability Company	·
	nendment and fee(s) are subm		
Please return all correspond	ence concerning this matter t	o me tonowing.	
	Kimberly	Pueler Name of Person	
		Firm/Company	
	5222 Na	Address	ay
	Tampa F Ktpeeler	City/State and Zip Code - + Wamail. Con o be used for future annual report noti	<u> </u>
	E-hail address: (t cerning this matter, please ca		heation)
Mandof P	tceler	at (<u>\$13</u>) <u>523</u> Area Code Daytim	- 1027 te Telephone Number
Enclosed is a check for the	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 Sec Division of Cor P.O. Box 6327		Street Address: Registration Se Division of Co The Centre of	rporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

110.40 HOUSE 4718	5-47216 600	
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our Limited Liability CompanSECRE IA TALL A	recorder)STATE
	TALLA	1,400 cm
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned
Florida document number <u>1-22000252825</u>	- ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	<u> </u>	
		,
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records.	enter the name of the new registe
ingent interior the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		P1*.1 .
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered	l Agent:	
I hereby accept the appointment as registered agent a		. I harden aaroo to aanah with
provisions of all statutes relative to the proper and co		
accept the obligations of my position as registered ag	gent as provided for in Chapter	605, F.S. Or, if this document is
being filed to merely reflect a change in the registered	d office address, I hereby confi	rm that the limited liability

company has been notified in writing of this change.

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>	Address	Type of Action
MGK	TDT Warehouse Managerre	nt Lic 4620 NW 8 Terrace	XIAdd
		Oakland Park Fi 3330	<u>9</u> □Remove
			□Change
MGR.	Kimberly T Pacler	8222 Noture Cove Way	□Add
		Tompa F1 33647	XRemove
			□Change
MGR Michael	Michael CThornpson	325 5 Humbold+ Street	□Add
		Derver \$080209	XRemove
			□Change
MGR	Cheryl Henley	3472 Foley Drive	□Add
		Tallahassee F1 32309	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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_	
_	
_	
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_	
Note: 1	the date, if other than the date of filing:
he record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	7.10 2022. Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Hariberty T. Peeler Typed or printed name of signee