

L22 000 253 807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

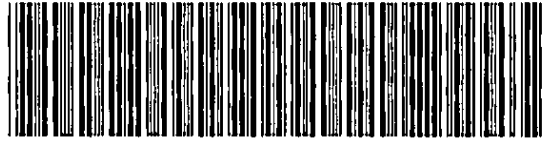
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DEPARTMENT OF  
RECORDS & ADMINISTRATION

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: " " LLENOR LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ronell V. Prioleau

Name of Person

LLENOR LLC

Firm/Company

17361 BLAZING STAR Circle

Address

Clermont, FL 34714

City/State and Zip Code

r.priolo@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronell Prioleau

Name of Person

at (407)

Area Code

701-5668

Daytime Telephone Number

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STATE OF FLORIDA  
DIVISION OF CORPORATIONS

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 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**

LLENOR LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6/2/2022 and assigned  
Florida document number L22000253807

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DIVISION OF CORPORATIONS

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)

17361 Blazing Star Circle  
Clermont, FL 34714

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

17361 Blazing Star Circle  
Clermont, FL 34714

**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:

New Registered Office Address:

17361 Blazing Star Circle

Enter Florida street address

Clermont

City

Florida

34714

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 Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

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SECRET

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 9-19, 2022

River

Signature of a member or authorized representative of a member

Ronell V. Prioleau

Typed or printed name of signee

**Filing Fee: \$25.00**