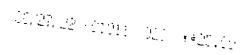
## L22000257333

(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	☐ MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2022 JUN 27 PH 2: 05

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## **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
Alling Hou			
SUBJECT:	Name of Lim	ited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Francis Zipeto		
		Name of Person	
	Alling House, LLC		
		Firm/Company	<del></del>
	215 E French Ave		
		Address	· · · · · · · · · · · · · · · · · · ·
	Orange City, FL. 32763		
		City/State and Zip Code	<del></del>
	francissells@gmail.com  E-mail address: (	to be used for future annual report no	tification)
For further information e	oncerning this matter, please c	·	
Francis Zipeto		774 826-5081	
Name o	f Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S Division of C	Section 'orporations	Street Address: Registration Se Division of Co	rporations
P.O. Box 632 Tallahassee, l		The Centre of 2415 N. Monro	1 allanassee oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Alling House, LLC	2022 JUN 27 PM 2: 05
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L22000257333	TENTE OF STATE
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lin	nited 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 ADDI	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida str <del>e</del> et address
	Florida
	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 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>	Name	Address	Type of Action
AMBR Kevin Phillips	411 Walnut St. # 14947	<u></u> <b>≘</b> Add	
		Green Cove Springs, F1 32043	□Remove
		□ Change	
			□Add
		□ Remove	
			Change
		□Add	
			□Remove
			Change
			□Add
		<del></del>	□ Remove
		<del> </del>	□Change
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an effe	re date, if other than the date of filing:
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt'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 of: (b) The 90th day after the d.
ated_	June 22, 2022.
	Francis Zignature of a member or authorized representative of a member
	Francis Zipeto Typed or printed name of signee