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(Re	equestor's Name)	
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COVER LETTER

Registration Section

Division of Corporations

Fallahassee, FL 32314

TO:

SUBJECT: <u>しょう</u>	Name of Limit	ed Liability Company	
The enclosed Articles of A	amendment and fects) are subu	nitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	D.0	Name of Person	
	Just b	Vild it Panstreed	ion CCC
	<u>5005 si</u>	J (9 ^{4th} 51) Address	
		City/State and Zip Code)
	E-mail address: (i	o be used for future annual report Auti	fication)
For further information co	neerning this matter, please et	ill:	1hal. com
Doos/d Name of	CORDON TITE Person	at (<u>772)</u> <u>722</u> Area Code Daytim	e Telephone Number
Unclosed is a check for th	c following amount:		V
El \$25.00 Filling 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 S Division of Co P.O. Box 632	ection orporations 7	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Com (A Florida Limite	pany as it now appears o	n our records.)
The Articles of Organization for this Limited Liability Compa	ay were filed on	$\frac{0}{10}$ $\frac{10}{202}$ and assigned
Florida document number $\angle 22000866723$		
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limited li	ability company here	:
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the desig	mation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	500 M - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(Principal office address MUST BE A STREET ADDRESS)		·
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)		
	41-4-4	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our reco	ords, enter the name of the new registered
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida	i street address
		Monido
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officempany has been notified in writing of this change.	ete performance of m is provided for in Ch	y duties, and I am familiar with and apter 605, F.S. Or, if this document is

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

Title	<u>Name</u>	Address	Type of Action
mGR	Samantha danella	5005 SW 6914 SH	13 Add
		19 palm City 1=C 34990	EXtemove
			🗆 Change
MGR	Donald L GORAN II	5005 Sw 6914 St	Add
		palm City, FL 34990	□Remove
			🗆 Change
			r≊j ∐⊒Add (mj
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wysia + nam - minimum.			[] []Change [] []Add
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ctive date, if other than the date of filing:effective date is listed, the date must be specific and cannot be prior to date of fil	(optional)
effective date is listed, the date must be specific and cannot be prior to date of fil \underline{x} . If the date inserted in this block does not meet the applicable statute	ling or more than 90 days after filing.) Pursuant to 605.02 ory filing requirements, this date will not be listed
imem's effective date on the Department of State's records.	. *
ord specifies a delayed effective date, but not an effective time, at 12:0	11 a.m. on the earlier of (b). The 90th day after th
filed.	of a.m. on the earlier of the over day after the
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(Jankal 1	
Signature of a member or authorized repres	sentative of a member

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