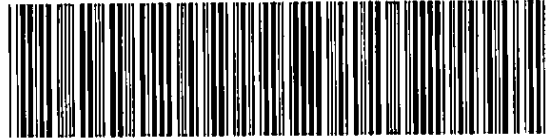


L2200027773



300431177353

(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

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2024 JUN 14 AM 10:15

TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive  
Tallahassee, FL 32301

850.656.7956

Fax: 850.656.7953

www.incserv.com

e-mail: accounting@incserv.com

incserv

**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corpshelp@dos.myflorida.com  
850-245-6051

**FROM** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 6/14/2024

**PRIORITY** Regular Approval

**OUR REF # (Order ID#)** 1261679

**ORDER ENTITY**  
4 JEAN LA FITTE LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**

**4 JEAN LA FITTE LLC ( FL )**

File the attached amendment and provide a certified copy.

**NOTES:**

\$55.00 Authorized

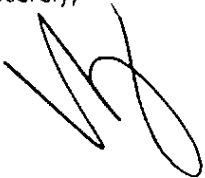
**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

2024 JUN 14 AM 10: 15

4 JEAN LA FITTE LLC

(Name of the Limited Liability Company as it now appears on our records, L. JEAN LA FITTE LLC)  
(A Florida Limited Liability Company) STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on June 17, 2022 and assigned Florida document number L2200027773.

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:**

9361 SW 130 st Miami, Fl 33176

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

9361 SW 130 st Miami, Fl 33176

**(Mailing address MAY BE A POST OFFICE BOX)**

**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: \_\_\_\_\_

*Enter Florida street 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> | <u>Name</u>                       | <u>Address</u>      | <u>Type of Action</u>                      |
|--------------|-----------------------------------|---------------------|--|
| AMBR         | Mark Louis Reineri                | 155 Cort Lane       | <input type="checkbox"/> Add               |
|              |                                   | Tavernier, FL 33070 | <input checked="" type="checkbox"/> Remove |
|              |                                   |                     | <input type="checkbox"/> Change            |
| AMBR         | Carly Reineri Thellman 2024 Trust | 2175 Federal Road   | <input checked="" type="checkbox"/> Add    |
|              |                                   | Roswell, GA 30075   | <input type="checkbox"/> Remove            |
|              |                                   |                     | <input type="checkbox"/> Change            |
|              |                                   |                     | <input type="checkbox"/> Add               |
|              |                                   |                     | <input type="checkbox"/> Remove            |
|              |                                   |                     | <input type="checkbox"/> Change            |
|              |                                   |                     | <input type="checkbox"/> Add               |
|              |                                   |                     | <input type="checkbox"/> Remove            |
|              |                                   |                     | <input type="checkbox"/> Change            |
|              |                                   |                     | <input type="checkbox"/> Add               |
|              |                                   |                     | <input type="checkbox"/> Remove            |
|              |                                   |                     | <input type="checkbox"/> Change            |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Multiple horizontal lines for amending information.

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2024 JUN 14 AM 10:15  
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the 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 record is filed.

Dated 06/13/2024 01:11 PM

*June Warner*

Signature of a member or authorized representative of a member

June Warner

Typed or printed name of signee