## Laa0003018930

(Requestor's Name)				
(Address)				
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(Cit	ty/State/Zip/Phone #)			
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(Document Number)				
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2022 JUL 15 PH 3: 0

## COYER LETTER

FO: Registration Section Division of Corporation	5		4	•
*4				
SUBJECT: LOCKS	by Lians	ne 115		
701000 11	Name of Limite	NE LLC ed Liability Company		
The enclosed Articles of Amendm	ent and feets) are subm	sitted for filing.		
Please return all correspondence c	oncerning this matter to	the following:		
•	-			
	1.00000	D-007		
	Luanne	Pacz Name of Person		
	LCOAS t	Firm/Company		
		•		
	5009 M	Address	n Way	
		Address	`	
	Pana	ma C.+y F	32404	
<del></del>	Logical subtress to	spulvanne @	comodification)	^_
For further information concerns	ig this matter, please ca	III.		
Luanne P	NO. EZ	at ( ( ( ) ( ) )	egz 3378	3
Name of Person		Area Code	Daytime Telephone l	Number
Enclosed is a check for the follow	ving amount:			
S25.00 Filing Fee	30,00 Filing Fee &	S55 00 Filing Fee &		0.00 Filing Fee.
	Certificate of Status	Certified Copy (additional copy is encle	••	ertificate of Status & — ertified Copy
		(Managam vop)		dditional copy is enclosed)
Mailing Address:	,	Street Ad- Registra	dress: tion Section	
Registration Section			of Corporations	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

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Name of the Limited Liabil (A Florid	Luance LLC ity Company as it now appears on the Limited Liabinty Company)	SECRETARY UT STEEL SECRETARY UT STEEL SECRETARY UT STEEL STEEL STEEL STEEL SECRETARY UT STEEL STEEL STEEL SECRETARY UT STEEL STEEL SECRETARY UT STEEL STEEL SECRETARY UT STEEL SECRETARY
The Articles of Organization for this Limited Liability C	Company were filed on	
Florida document number <u>LZZ600306930</u>	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the desig	nation "LLC" or the abbreviation "L L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	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:		rds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	street address
		Florida
	Cuv	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 jurther 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 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 Type of Action <u>Address</u> Title Name 5000 Merritt Brown Nay inde Luanne Baez MGB Parama C. Jy FL. 32404 CRemove \_\_\_\_\_ Change 3106 PeaceFullane EAdd AMBK Michael Montero Chipley FL, 32428 PRemove (Currently MGR) Change to AMBR ≝Change DAdd □ Add \_\_\_\_\_ Change \_\_\_\_\_ □Remove []Change □Remove \_\_\_\_\_ □Change □ Remove

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Luanne Baez		

Filing Fee: \$25.00