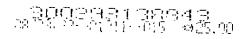
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(Requestor's Name)
	Address)
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	Address)
	City/State/Zip/Phone #)
(City/State/Zip/Fhone #)
PICK-UP	WAIT MAIL
(Business Entity Name)
	Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Films Officer
Special Instructions to	Filing Onicer.





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J 8/23/2022

COVER LETTER

Division of Corpo			
4EVERC	RINDING LLC Name of Limite		
SUBJECT:	Name of Limite	d Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are subm	itted for filing.	
Please return all correspond	ence concerning this matter to	the following:	
	a: T .		
	Diana Veunty	Name of Person	
		Firm/Company	<u> </u>
	mu Com H	and way	
	1716 000,000	awk way Address	
		32 O & & City/State and Zip Code	
	msmuson 39 / 6 3	o be used for future annual report notifi	cation)
P. C. ale a information on	ncerning this matter, please ca		,
			1,,00
Diana Vennty	D	at (678) 7.77 - Area Code Daytime	Telephone Number
Name of	Person	7,464 6540 2 1,444	
Enclosed is a check for the	e following amount:		
	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

HEVERGRINDING LLC	2022 #13 23	Pii 2: 43
(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 $\frac{7/18/2022}{220003/7/04}$.	and assigned	1
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 a Enter new principal offices address, if applicable:	abbreviation "L.L.C."	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address, if Applicable)		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office address on our records, enter the nar agent and/or the new registered office address here:	me of the new reg	gistered
Name of New Registered Agent:		
New Registered Office Address: Enter Florida street address		
	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
<u>mgr</u>	Diana Veanty	1416 Coopers Hank way	XAdd
	V	Middlebug, FL 32068	Remove
			□Add
			□Remove
			□Change
* ***			🗆 Add
			□Remove
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an effective d	te, if other than ate is listed, the date date inserted in th ffective date on th	e must be specific iis block does no	and cannot be of meet the a	pplicable statui	ling or more than ory filing requi	(optional 90 days after tiling ements, this dat) 2.) Pursuant to 605.020 2 will not be listed a
record spect d is filed.	ties a delayed eff	ective date, but	not an effect	ive time, at 12:	Oi a.m. on the c	earlier of: (b) T	he 90th day after th
Dated	8/23		Sw.	2,7-			
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жией <u></u>		<u>////</u>	100	d and bound and	esentative of a me	mber	

Filing Fee: \$25.00