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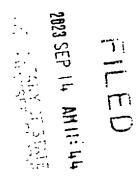
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<u>.</u>
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(Document Number)
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LLC N/C& Amend



A. RAMSEY SEP 28 2023

Desirer Gave permission to add the Suffix L.L.C.

COVER LETTER

O: Registration Se Division of Cor				
ubject: <u>CONT</u> C	nder Enterpris	es Worldwide ited Liability Company		
he enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
lease return all correspo	ondence concerning this matter	to the following:		
(Neonee Contender	A. Ruggerio Enterprises W	orldwide	
		Firm/Company		
	8705 Arm	owhend Drive		
	Bayonet Poin	ut (Hudson) Floric	n 31667	
	Contender En	terprises Vorldwig	de at Yahoo. Com	
or further information c	oncerning this matter, please c	all:		
Desiree A	Person Detio	at (631) 721- Area Code Daytim	e Telephone Number	
nclosed is a check for th	ne following amount:			
(S25.00 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		<u>Street Address:</u> Registration Sec	ction	
Division of C	orporations	Division of Corporations		
P.O. Box 632 Tallahassee, 1		The Centre of T 2415 N. Monro	'allahassee e Street, Suite 810	
		= 115 11 010 mo		

Tallahassee, FL 32303

ne Articles of Organization for this Limited Liability	y Company were filed on Ullion and assigned and assigned
orida document number (1993)	
his amendment is submitted to amend the following	<u>;</u>
. If amending name, enter the new name of the	limited liability company here:
Lontender Enterpr	ises Worldwide L.L.C
ie new name must be distinguishable and contain the words."	Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
nter new principal offices address, if applicable:	8.100 VIIDAIIECT DIVE
<u>'rincipal office address MUST BE A STREET AL</u>	DIVONEL MOINT, FLOLICU
	<u> </u>
nter new mailing address, if applicable:	8705 Armwherd Drive
Tailing address MAY BE A POST OFFICE BOX	Pavavet Point. Firing
	34668
If the state of th	
ent and/or the new registered office address her	ered office address on our records, <u>enter the name of the new registered</u> r <u>e</u> :
	unt analinable
Name of New Registered Agent:	Not abblicable
New Registered Office Address:	Same as listed above
	. Florida
	Cuy Zip Code

w Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and weept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ring filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

Not Applied C.
If Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added_removed from our records:</u>

GR = Manager MBR = Authorized Member <u>tle</u> Name Address **Type of Action** 8705 Arrowhead Dr. DAUG prio, Desiree A. Ruperio, Desiree A. Change address to DANGE □Remove _____ □Change ____ □Add □Remove _____ □Change □Add Remove \Box Change _□Add _ □Remove

_ □Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Not applicable
,	
re .	NIA
an et l <mark>ote:</mark>	tive date, if other than the date of filing:
e re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
ated	September 10th. 2023
	Signature of a member or authorized representative t a member
	Desiree Ann Rugerio Typed or printed name of signed

Page 3 of 3

Filing Fee: \$25.00