## L22000 347001

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## **COVER LETTER**

	Registration Se Division of Cor			
SUBJEC"		Collectables		
SUBJEC	· <u> </u>	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	urn all correspo	ondence concerning this matter	to the following:	
		Moses Martinez		
		<del></del>	Name of Person	<del></del>
		3 Doodles Collectables		
		<del></del>	Firm/Company	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		8569 Triumph Cir		
			Address	
		Wildwood,FL 34785		
		<del></del>	City/State and Zip Code	
		3doodlescollectables@gma	il.com	
		E-mail address: (	to be used for future annual report no	tification)
For furthe	r information e	oncerning this matter, please c	all:	
Moses Ma	artinez		786 865-7372	
	Name o	f Person		ne Telephone Number
Enclosed i	is a check for th	ne following amount:		
□ \$25.0	0 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)
	<u>Tailing Addres</u> Registration S		Street Address: Registration Se	vetion
	Division of C		Division of Co	
F	P.O. Box 632	7	The Centre of	Tallahassee
Ţ	fallahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3 Doodles Collectables (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 August 8, 2022 and assigned Florida document number L22000347001 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 3 Doodles Collectables LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new 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 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

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 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
			□Add
			□Remove
			□Change
	<del></del>		□ Add
			□Remove
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te: If the date inserted in	an the date of filing:
ecord specifies a delayed e is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
March 8	2024
(1/2)	
	Signature of a member or authorized representative of a member
Moses Martinez	
	Typed or printed name of signee

Filing Fee: \$25.00