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94/11/24--01022--002 **25.00

COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: DLUNBIN EXPRA	55 116	
The enclosed Articles of Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence concerning this matter	to the following:	
DRE LUI	biN	
	Name of Person	
	Firm/Company	5E0
7303 WO	ODHILL PARK Address	Dr. 語望
ORLANDO	City/State and Zip Code	20 AN
15GTHE6 E-mail address: (OSS Q+ GMQiZ to be used for future annual report notif	1.COM POR B
For further information concerning this matter, please c		
DRE Lubin	at (<u>407</u>) <u>398</u> Area Code Daytime	-9470
Name of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the following amount:		
☐ \$25.00 Filing Fee	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Sec Division of Corp The Centre of Tallahassee, FL	porations allahassee : Street, Suite 810

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>	Address	Type of Action
AMBR	MESIDOR WILBERT		□Add
		711 SHERWOOD TERRHULDO ORLHNDO FL 32818	· ZRemove
			_ Change
			_ 🗆 Add
			_ □Remove
			_ □Change
			_ □Add
		SECOLUTARY TALL THE	Remove
		12.1	_ □Remove
			_ 🗆 Change
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		b) The 900	h day aft	ter the
red 4-8-24.				
DUIT Simply of a margher of authorized and a margher of a margher	ed 4-8-24			
Signature of a member or authorized representative of a member	ed 4-8-24.			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabilit	Company as it now appears on ou Limited Liability Company)	r records.)
(д гонца	Change Campany)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned
Florida document number <u>LZZXXX406Z4Z</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
-	. ,	7/4 ECG
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET ADDR</u>	ESS)	
		기 <u>기 - 기</u>
Inter new mailing address, if applicable:		27 %
Mailing address MAY BE A POST OFFICE BOX)		150
maning agaress man DE A 1 031 OF TICE DO.		
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records	enter the name of the new registor
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
		, Florida
	Сиу	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