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COVER LETTER

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TO: Registration S Division of Co			
	rine Car and Chauffeur Service		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Charmaine Dixon		
		Name of Person	
	N/A		🗠
		Firm/Company	
	106 Baldwin Blvd		2023 OCT 27 PH
		Address	27
	Greenacres, Florida, 3346.	3	
	•	City/State and Zip Code	 ු: සි
	Charmai5466@aol.com		
	E-mail address: (to be used for future annual report notif	ication)
for further information of	concerning this matter, please c	all:	
Charmaine Dixon		561 713 6225 at ()	
Name o	of Person		: Telephone Number
Enclosed is a check for t	he following amount:		
☐ \$25.00 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 Addre Registration Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Con The Centre of T 2415 N. Monroo Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LELite Mac	ine Confidence Carlo	And Chou as it now appears on our re- pility Company)	Hour Bervice LLC
The Articles of Organization for this Limited L Florida document number \(\bigcup_220004\)	iability Company we	ì	2022 and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of the new name must be distinguishable and contain the w	IIA		LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able: _	NA	202 3.5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	- <u>BOX)</u> _	N/A	300 B C C C C C C C C C C C C C C C C C C
B. If amending the registered agent and/or ragent and/or the new registered office addre	egistered office add ss here:	lress on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:	Charmaine Dixon		
New Registered Office Address:	106 Baldwin Blvd		
		Enter Florida street ad	dress
	Greenacres		Florida 33463
		City	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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

IGR = Manager MBR = Authorized Member

<u>itle</u>	<u>Name</u>	Address	Type of Action
/A 	N/A	N/A	□Add
			□Remove
			□ Change
<u> </u>	Charmaine Dixon	106 Baldwin Blvd	XIAdd
		Cheenacter, FL, 334	B □Remove
			□Change
	United States Corpora	4m 5575 Sumoran	
		blvd, orlando, FL	Remove
		32822	Change
			2023Add ·
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			Change

Address5575 S. SEMORAN BLVD., ORLANDO, FL, 32822 and implement new registered agent to be Charmaine				
whose address is 106 Baldwin Blvd, Green	enacres, Florida			
				
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			2023 (\$40)	
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	09/26/2023			
tive date, if other than the date of fill ffective date is listed, the date must be specific a	ling:and cannot be prior to date of filir	ng or more than 90 days af		
If the date inserted in this block does no nent's effective date on the Department o		y filing requirements, t	nis date will not be	liste
ord specifies a delayed effective date, but r iled.	not an effective time, at 12:01	a.m. on the earlier of:	(b) The 90th day a	after
2.1.1.2.2.22	00 20			
october 23	-, WG			

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