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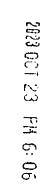
(Requestor's Name)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	-
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COVER LETTER

Registration Section

TO:

Divi	sion of Cor	porations				
	MAKIRS I	.L.C				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		KANNON D SIEMER				
			Name of Person			=
		MAKIRS LLC				
			Firm/Company			-
		10934 CR 475				
		***************************************	Address			.
		OXFORD, FL 34484				
			City/State and Zip C	ode	•	_
		MAKERS0803@GMAIL.C	OM to be used for future and	us cenari natific	ation)	
For further in	formation c	oncerning this matter, please c		,	,	
KANNON D	SIEMER		813	422-9890		
	Name o	f Person	at () Area Code	Daytime T	elephone Numbe	т
Enclosed is a	check for th	ne following amount:				
■ \$25.00 Fi	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing I Certified Copy (additional copy i	<i>;</i>	Certifiec	ite of Status &
	ling Addres	 -		t Address: stration Secti	on	
_		orporations	_	sion of Corpo		
	. Box 632			Centre of Tal		110
Lall	lahassee, l	rt. 32314	2411	N. Monroe S	Street, Suite i	STU

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAKIRS LLC

(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number 1.22(0)(449)86	were filed on 10/18/2022	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liah	oility company here:					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	10934 CR 475					
(Principal office address MUST BE A STREET ADDRESS)	OXFORD, FL 34484	10.00				
		<u> </u>				
		3: N				
Enter new mailing address, if applicable:	10934 CR 475					
(Mailing address MAY BE A POST OFFICE BOX)	OXFORD, FL 34484					
		<u> </u>				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records <u>ciner in</u>	Think of the new regiments				
New Registered Office Address:						
New registered Office Hadress.	Enter Florida street address					
	, Florida					
	City	Zip Code				
New Registered Agent's Signature, if changing Registered Agent:						
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F.S.	l am familiar with and S. Or, if this document is				
If Char	nging Registered Agent, Signature of N	ew 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>	<u>Name</u>	Address	Type of Action
MGR	MARIO J SOTO SR	2801 NW 23RD BLVD, APT V150	
		GAINESVILLE, FL 32605	■Remove
			□Remove
		-	□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			☐ Change
			□Add
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08/0 lective date, if other than the date of filing:	01/2023			(ootional)		
fective date, if other than the date of filing: un effective date is listed, the date must be specific and cannot be specifically and cannot be specific and cannot be specifically and cannot be specifically and cannot be specific	be prior to d	ate of filing or	more than 90 d	ays after filing.)	Pursuant to	605.02
ote: If the date inserted in this block does not meet the scument's effective date on the Department of State's re-		statutory in	mg requireme	mis, this date v	viii noi oc	nstea
ecord specifies a delayed effective date, but not an effe	ective time,	at 12:01 a.m	i, on the earli	er of: (b) The	90th day	after th
is filed.						
ated OCTOBER 2 . 2023	3					
	·					
K = K						
Signature of a member						

Filing Fee: \$25.00