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Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Cor	rporations			
elibiroti Mi	irture Your YE	s LLC		
SUBJECT:TM	Name of Limi	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:		
	Tenisha	Osborn Name of Person		
		Firm/Company		
	721 Creek	water Terrace Appe	#107	
	Lake Mary	FU 32746 City/State and Zip Code	,	702
	Nurture you E-mail address: (ur yes (a) gmail.com to be used for future annual report notif	ication)	2 NOV.
For further information c	concerning this matter, please ca	all:	!	8
Tenish Name o	a Osbazn of Person	at (<u>313</u>) <u>595-0</u> Area Code Daytimo	Telephone Number	2022 NOV 28 PH 4: 12
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)	
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Sec	ction	
Division of C	Corporations	Division of Cor The Centre of T	porations	
P.O. Box 631	<u> </u>	THE COURT OF I		

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Murture Your	YES LLC		
(Name of the Limited Lie (A Fig.	ability Company as it now appears o orida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liabilit Florida document number <u>し</u> 27 <i>®</i> ゆ4 <i>5</i> 5℃		+ 20,2022 a	nd assigned
This amendment is submitted to amend the following	7.		
A. If amending name, enter the new name of the	limited liability company here	:	
The new name must be distinguishable and contain the words	Limited Liability Company," the design	gnation "LLC" or the abbreviat	ion "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DDRESS)		
Enter new mailing address, if applicable:		17 	2022 NS
(Mailing address MAY BE A POST OFFICE BOX)		124 ST	<u> </u>
		73 S	
B. If amending the registered agent and/or registe agent and/or the new registered office address her		rds, enter the name of th	ie new registered №
Name of New Registered Agent:			
New Registered Office Address:	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 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	<u>Address</u>	Type of Action
AMBR	Tenisha Osborn	721 (reekwater Terrore	XIAdd
		<u>Apr107</u>	□Remove
		Lave Mary, FL 32741	<u>-P</u> □Change
MCzc	Jessica Anderson	365 Ricky Lane	□ Add
		St. Cloud FL, 34772	Remove
NAC.			□Change
MGR.	Daniel Osborn	721 Creekwater Torrace	5/Add
	·	Apt 107	□Remove
		Lake Mary, FC 32740	<u>⊘</u> □Change
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an effe	ve date, if other than ective date is listed, the dat	te must be speci	tic and can				days after fi	ling.) Purs		
<u>ote:</u> ocum	If the date inserted in the ent's effective date on t	ais block does the Departmer	i not meet at of State	the applicar 's records.	de statutory	ming requiren	ients, this c	late will i	not be n	sied as i
	l specifies a delayed eff	lective date, b	ut not an e	affective tim	e, at 12:01 a	.m. on the earl	ier oft (b)	The 90t	h day ati	ier the
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