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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: News 5top Worship LLC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jessicca No Kim
Never Stop Worship LLC.
2530 CHYUS Tayler blvd. Apt #20207
Clermont, FL 34711 City/State and Zip Code
Never stop worship 7 @ amail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jessica U. Lom at (400) 2015616  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:  Registration Section  Street Address:  Registration Section
Division of Corporations  Division of Corporations
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	33 25
	hip LLC. ity Company as it now appear a Limited Liability Company)	•
The Articles of Organization for this Limited Liability C Florida document number <u>L 22000 49 023</u>	Company were filed on <u>()</u>	ovember 14, 22 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company he	<u>re</u> :
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the de	signation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		···
(Principal office address MUST BE A STREET ADDI	RESS)	<del></del>
	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our re	cords, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	da 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>	<u>Name</u>	Address	Type of Action
MGR	Jessicca N. Kim	2530 Citrus Tower blvd. Apt#20201 Clermont, FL 34711	_ CDA/dd
			_ □Remove
			_ Change
	***************************************		_ □Add
			_ 🗆 Remove
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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fan cf Note:	tive date, if other than the date of filing: January 1st 2023 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
recor d is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	January 05 2023
	Signature of a member of authorized representative of a member