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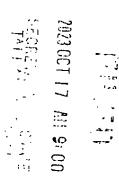
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COVER LETTER

TO: Registration Se Division of Cor		
subject: <u>Мал</u>	Name of Limited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are submitted for filing.	
Please return all correspo	ndence concerning this matter to the following:	
	Steven Dale McVa	
	Nanny Designs LLC Firm/Company	
	300 E. Main Street, Ste	, 193
	Wauchula, FL. 3387. City/State and Zip Code	<u>3</u>
	nannyde Sign S@grail.com JE-mail address: (to be used for future annual repo	ort notification)
For further information co	oncerning this matter, please call:	717
Kim W	f Person at (863) 21 Area Code	15-3755 E Daytime Telephone Number
Enclosed is a check for th	ne following amount:	, ···
□ \$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

110

Wanny Design			
(<u>Nathe of the Limit</u>)	d Liability Company as it now appe A Florida Limited Liability Company)	ars on our records.)	
		:01 1	
The Articles of Organization for this Limited Lia		12 02 2022	and assigned
Florida document number <u>L22000</u>	508537	, 1	
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company l	iere:	26
		<u> </u>	73
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the	designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applica	ble:	اسه <u>-</u> و اسام حم اسام حم	
(Principal office address MUST BE A STREE)	ADDRESS)	nc nc	
			<u>ب ب</u>
		; <u></u>	00
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE I	<u> </u>		
B. If amending the registered agent and/or reagent and/or the new registered office address		records, <u>enter the nam</u>	e of the new registered
	Ctava T	I May	2 . 1
Name of New Registered Agent:	<u>Jieven</u> I	ale Micro	<u> </u>
New Registered Office Address:	35 Garcia Lan	C orida street address	
	Tracks C		スプラン
	TRUDIPROOF	, Florida	2ip 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.

Stewn Dale McVay
If Changing Registered Agent. Signature of New 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
AMBR	Steven Dale Movay	35 Garcia lane Frostproof, FL 33843	[XAdd
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Effective date, if other to fan effective date is listed, the Note: If the date inserted document's effective date	e date must be specific a in this block does no	and cannot be prior! of meet the applica	to date of filing or mo able statutory filing	coption (option) (opt	filing.) Pursuant to 6	605,0207 isted as
record specifies a delayed is filed.	I effective date, but r	not an effective ti	me, at 12:01 a.m. o	n the earlier of: (b)) The 90th day a	fter the
Dated 10 05		2023	<u>3</u> .			
	Signature o	Sa member or author	rized representative	of a member		
Ļ	1:' \ \ \ '		1/0:1			

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