## L22 000 512 650

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## **COVER LETTER**

TO: Registration S Division of Co.			
SUBJECT:	ak robell fra	n r s pac r /G / rows // // (med diability Company	<u>,</u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Yorder Ro	Sell Sulles	
	•	Name of Person	
		₹ Fиm/Company	
	440 Lylle st	Address	
		Address	
	west pulm	Geoch F. L City State and Zip Code	33405
	Yonderrose 11. E-mail address:	salle (b) 2, n 2, 1 . 0000 to be used for future annual report not	7 fication)
For further information c	oncerning this matter, please ca	all:	s-
Yond	er Rusell Sull	eS_at ( <u>786</u> ) <u>485</u> Area Code <u>Daytim</u>	4458
Name o	f Person (	Area Code Daytim	e Tulephone Number
linclosed is a check for the	ne 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 Addres	v:	Street Address:	
Registration S	Section	Registration Se	
Y Division of C P.O. Box 632	•	Division of Cor The Centre of T	•
Tallahassee, I			e Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ak rosell fro	insportat	ion 1/c		
( <u>Name of the Limite</u> (	<u>d Liability Compa</u> A Florida Limited L	ny as it now appears on ou Liability Company)	r records.)	
The Articles of Organization for this Limited Liz Florida document number <u>L 22 000 51 24</u>		were filed on1Z <sub>1</sub>	106/2022	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the <u>li</u> mited liabi	ility company here:		
The new name must be distinguishable and contain the we	ords "Limited Liabil	ity Company," the designation	on "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	(ADDRESS)		· · · · · · · · · · · · · · · · · · ·	<del>~_;</del>
				· .
Enter new mailing address, if applicable:				<u></u>
(Mailing address MAY BE A POST OFFICE E	<u>80X)</u>			
				يد
B. If amending the registered agent and/or re agent and/or the new registered office address		iddress on our records	, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:	Jonder	Rosell Sa	lles	
New Registered Office Address:	446 Ly	Rosell Sa He st Apt A Enter Florida stree	n address	
	west i	salm beach	, Florida	33405
		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

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	Address	Type of Action
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i	te, if other thar ate is listed, the dat date inserted in the ffective date on the	te, if other than the date of an action is listed, the date must be specificate inserted in this block does affective date on the Department fies a delayed effective date, but	te, if other than the date of filing:  ate is listed, the date must be specific and cannot be date inserted in this block does not meet the effective date on the Department of State's refies a delayed effective date, but not an effective date.	te, if other than the date of filing:  ate is listed, the date must be specific and cannot be prior to date of date inserted in this block does not meet the applicable state ffective date on the Department of State's records.  fies a delayed effective date, but not an effective time, at 12	te, if other than the date of filing:  ate is listed, the date must be specific and cannot be prior to date of filing or more that date inserted in this block does not meet the applicable statutory filing requificative date on the Department of State's records.  These a delayed effective date, but not an effective time, at 12:01 a.m. on the	te, if other than the date of filing:	te, if other than the date of filing:

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