## L2200528940

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
ified Copies Certificates of Status	
ecial Instructions to Filing Officer:	
Office Use Only	-



700399674387

01/06/23--01002--004 ++25.00

RECEIVED 2021 JAN -6 AH 8 49 SEGRETARY OF STATE ALLAMASSE STATE

SECINET AND STATE

•		COVER LETTER	
Registration Se Division of Co			
	oun Enterprises, LLC		
JECT:	Name of I	imited Liability Company	<del></del> _
		,	
inclosed Articles of	Amendment and fee(s) are	ubmitted for filing.	
e return all correspo	ondence concerning this mat	ter to the following:	
	Staisha McCants		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
		Firm/Company	· <del></del>
	830 E Park Ave Apt 120	1	
	Tallahassee, FL 32301	Address	
	Taranassee. 113 72.001	Ci. (C) 177 (C) 1	
	staishamceants98@gma	City/State and Zip Code .com	
	E-mail addres	s: (to be used for future annual report noti	fication)
further information of	oncerning this matter, pleas	e call:	
sha McCants		863 450-5644	
		at ()	
Name c	of Person	Area Code Daytim	e Telephone Number
osed 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)	<ul><li>\$60.00 Filing Fee,</li><li>Certificate of Status &amp;</li><li>Certified Copy</li></ul>

## **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

(additional copy is enclosed)

## ARTICLES OF ORGANIZATION OF

FILED

R&S Soumoun Enterprises, LLC

2023 JAN -6 AM 9: 05

(Name of the Limite	ed Liability Compa	ny as it now appears on our r liability Company)	eçords.)	
•	(A Florida Limited I	liability Company)		SEURE IAK I OF STATE TALLAHASSEE, FL
minter of Occamination for this Limited Li	ability Commons	December 19	9, 2022	and assigned
rticles of Organization for this Limited Li.	aniny Company	were filed oil		and assigned
a document number 1.22000528940	····································			
mendment is submitted to amend the follo	wing:			
amending name, enter the new name of	the limited liabi	lity company here:		
w name must be distinguishable and contain the we	ords "Limited Liabil	ity Company," the designation	"LLC" or the	abbreviation "L.L.C."
new principal offices address, if applica	able:			
ipal office address MUST BE A STREE	TADDRESS)			
· ·				
new mailing address, if applicable:				
ing address MAY BE A POST OFFICE I	Phy			-
TIG UUUTESS MAT BE A FOST OF FICE I	<u> </u>			<del></del>
amending the registered agent and/or reand/or the new registered office addres	· · ·	ddress on our records, <u>e</u>	nter the na	ne of the new registered
Name of New Registered Agent:				
Nove Businessand Office Address				
New Registered Office Address:	· · · · · ·	Enter Florida street o	uddress	
			· · ·	
		City	Florida _	Zin Code
Indictional Agent's Signature if shanging D	tariatanad Agant.	VII,		
legistered Agent's Signature, if changing R				
by accept the appointment as registered sions of all statutes relative to the prope t the obligations of my position as regis filed to merely reflect a change in the r any has been notified in writing of this o	er and complete stered agent as p registered office	performance of my dutionrovided for in Chapter (	es, and Lam 605, F.S. Oi	familiar with and ; if this document is
	If Chan	ging Registered Agent, Signa	ture of New R	egistered Agent
	1	ur er		

loved from our records:		
= Manager R = Authorized Member		
<u>Name</u>	Address	Type of Action
Witchkervens Dubreus	215 Dixie Dr. Apt F. Tallahassee, FL 32304	
_		🗆 Add
		□Remove
		□ Add
		□Remove
		□Change
		□Add
		□Remove
		□Change
		□ Remove
		□ Change
		□Add
		Remove
		□Change
		□Add
	<del></del>	□Remove
		Change

		<del>-</del>
		<u> </u>
<u> </u>		
		01/01/2023
fective If th	late, if other than the date of filing the date is listed, the date must be specific and the date inserted in this block does not a effective date on the Department of	d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 meet the applicable statutory filing requirements, this date will not be listed as
d spe led.	ecifies a delayed effective date, but no	an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	Anuary 6	2023 Ved M
		member of authorized representative of a member
7	Signatule of a	Themsel of authorized representative of a memoer