L23000032004

(Requ	uestor's Name)	
(Addi	ess)	
(Addi	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Doce	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	





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COVER LETTER

4 TO:

Registration Section Division of Corporations

YOJALIZI SUBJECT:	E. LLC		
SUBJECT;	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	ALICE J SUCKOO-COLE	EY	
		Name of Person	
	YOJALIZE, LLC		
		Firm/Company	
	3633 VIA MONTE NAPO	DLEONE DRIVE	
		Address	
	POINCIANA, FLORIDA	34759	212
		City/State and Zip Code	ZOZJ HAR
	SUCKOOA@GMAIL.COM		: : \
	E-mail address: (to be used for future annual report notification	• •
For further information of	concerning this matter, please c	all:	新 第 8
ALICE J SUCKOO-COLEY 305 496-7645			8: 36 STATE
Name o	of Person	at ()	phone Number
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)
Mailing Address Registration : Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Section Division of Corpora The Centre of Tallal 2415 N. Monroe Str	tions hassee

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/17/2023	records.)		
The Articles of Organization for this Limited Liability Company were filed on $\frac{01/17/2023}{1}$			
	an	ıd assig	ned
Torida document number L23000032004			
This amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liability company here:			
he new name must be distinguishable and contain the words "Limited Liability Company," the designation	1 "LLC" or the abbreviati	on "lL.	(°.''
Inter new principal offices address, if applicable:		20.	
Principal office address MUST BE A STREET ADDRESS)	jast.	20	** **
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inter new mailing address, if applicable:	m		رهاني دعما
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	ധ	
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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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LANCELOT COLEY	3633 Via Monte Napoleone Dr. Poinciana, FL 34759	■Add
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			□Change
			□Add
			□Remove
			_ □Change -
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ffective date, if other than the an effective date is listed, the date in this ocument's effective date on the	oust be specific and c block does not me	cannot be prior to di cet the applicable	ate of filing or more the statutory filing req	(option an 90 days after fil uirements, this d	ing.) Pursuant to	605,0207) listed as t
record specifies a delayed effect his filed.	ive date, but not a	n effective time.	at 12:01 a.m. on the	e earlier of: (b)	The 90th day	after the
MARCH 21		2023			202	7
		·		/	UZ3 MAR 21,	<u>u</u>
	Signature of a me). Such	d representative of a r	nember	· · · · · · · · · · · · · · · · · · ·	
						~
ALICE J SUCKOO-O				,	新夏 全	·