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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Se	Iling 27 L	LC	
SOBSECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
·			
	Niqui	A MC WATE	ERS
		Name of Person	
	NiQUIA	McWaters LI	LC
	MINI Pat	_	
	<u> 2921 1ec</u>	Address	
	nikkin Emil address I	City'State and Zip Code Cut Tes 17 @ to be used for future annual report noti	gmail com
For further information of	concerning this matter, please ca		
, .	_		7 6111
NIQUIA N	CUCULS of Person	at (863) 660	(-) / O e Telephone Number
Name (v rerson	raca v voc 1 rayuu	e reter name vanimer
Enclosed is a check for t			
□ \$25.00 Filing Fee	S30.00 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 Addre Registration Division of C P.O. Box 63. Tallahassee,	Section Forporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FI	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sall - 27 110

ny as it now appears on our records.) Jability Company)	
were filed on $\frac{1}{30} \frac{30}{23}$ and assigned	
ility company here:	
2421 Peterson Rd	
Lakeland HL 33812	
PILED 2023 FEB 113 AN IO STATE WAS SEE.	
iddress on our records, enter the name of the new registe	<u>red</u>
Enter Florida street address	
, Florida	
i i	ty Company here: 2421 Peters on Rd Lakeland ft 33812 NA 25 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

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, <u>enter the title, name, and address of each person_being added or removed from our récords</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			⊡Remove
			□Add
			□Remove
			□Add
			□Remove
			□Change
			🗔 Add
			□Remove
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			\ \ \ \ \ Remove
			\

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(II an el <u>Note:</u>	tive date, if other than the date of filing:
If the reco record is f	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	2/10 2023
	naina maratus
	Signature of a member or authorized representative of a member NIQUIA MC WATERS
	MIQUIA NC WATERS

Typed or printed name of signee