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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Chain & Fernande 3 LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person Choin & Ferwards LLC Firm/Company 10720 NW 82 terrare #5 Address Dorar Pr 33178 City/State and Zip Code Charry fernandes @ gmail.com E-mail address: (to be used for future annual report notification)
E-mail addreys: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Name of Person Name of Person Name of Person Area Code Daytime Telephone Number 186
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee SCertificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

Chain &	Fernandez LLC
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number 2230006602 This amendment is submitted to amend the following:	Company as it now appears on our records.) Limited Liability Company) Impany were filed on 02/06/2023 and a gred, 2
A. If amending name, enter the new name of the limit	ed liability company here:
NA	ed Liability Company," the designation "LLC" or the abbreviation "LLQ."
The new name must be distinguishable and contain the words "Limit	
Enter new principal offices address, if applicable:	10720 MU 82 TENNACE
(Principal office address MUST BE A STREET ADDRE	10720 MU B2 TENNACO 10072 MU B2 TENNACO 10072 MU B2 TENNACO 100720 MU B2 TENNACO 100720 MU B2 TENNACO
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	10720 MW 82 NEMASG Un'7 5 Done, Gr 33178
agent and/or the new registered office address here:	office address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	omeno, Jaine Well
New Registered Office Address: /O	7 20 hw 32 TERRAGO W. 15
	Domero, Jaine Well 7 20 NW 32 TERMS Wit 5 Enter Florida street address Ord City: Florida 33/3-8 Zip Code
N. B. Carlotte and Charles and	

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>	<u>Name</u>	Address	Type of Action
MGR	Romero, Jainewel	10720 m 82 tenute Ut5	🗆 Add
		Dorl, fr. 33178	XRemove
			□Change
MGR	Chain de fernandes Josy	your 158 m asfol name	⊠Add
		wt 5. Doze fr 33178	
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			□Add
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			🗆 Add
			□Remove
		/	□Change
			□Add
	-		Remove
			□Change
			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)		
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	2023	X
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E. Effective date, if other than the date of filing:	g.) Pursuant to 605.0207	
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) Trecord is filed.	The 90th day after the	
Dated 1.14 18 . 2023 Signature of a member or authorized representative of a member Tesus Fernande AMBR Typed or printed name of signee		
signature of a member of authorized representative of a member		
Mesus Fernande AMBR		

Filing Fee: \$25.00