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COVER LETTER

SUBJECT: GRAND			
	Articles of Amendment and fec(s) are submitted for filing. all correspondence concerning this matter to the following: Corporate Maintenance Lead Name of Person Processing Department Fine/Company 1450 Vassar St Address Reno, NV 89502 City/State and Zip Code E-mail address: (to be used for future annual report notification) formation concerning this matter, please call: Processing Department at (800		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Corpor	rate Maintenance Lea	ad
	Proc	cessing Department	
		Firm/Company	
		1450 Vassar St	
		Address	. (
		Reno, NV 89502	
		City/State and Zip Code	7-1 0-
	E-mail address: (to be used for future annual report notif	cation)
For further information co	oncerning this matter, please c	ali:	
		at (800) 638-2320	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e 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 Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ANDIOSO, LLC	
(Name of the Limited Liability (A Florida l	y Company as it now appears on our record. Limited Liability Company)	<u>s.</u>)
he Articles of Organization for this Limited Liability Co	ompany were filed on 02/07/23	and assigned
lorida document number L23000068004		
his amendment is submitted to amend the following:		
If amending name, <u>enter the new name of the limit</u>	ted liability company here:	
he new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		-: '7
Principal office address MUST BE A STREET ADDRI	ESS)	· · · · · · · · · · · · · · · · · · ·
nter new mailing address, if applicable:		97
Mailing address MAY BE A POST OFFICE BOX)		i i c
3. If amending the registered agent and/or registe	ered office address on our records	s, enter the name of the
egistered agent and/or the new registered office addr		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	S
	, Flo	orida Zip Code
	Z-HLP	$x\mu \cos \epsilon$

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	William Garrison	2145 Kylar Dr Nw	
		Palm Bay	☐ Remove
		FL, 32907	□ Change
			☐ Remove
			D Add \
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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	block does not meet t	the applicable sta	of filing or more than 9 tutory filing require	(option 0 days after fi ments, this d	lina i Pursi	uant to 605 of be liste	.0207 (3) ed as the
the record specifies a delaye) The 90th day after the rec	ed effective date, cord is filed.	, but not an e	ffective time, at	: 12:01 a.ı	m. on th	ne earlie	er of:
Dated 137ED 2023							
	Signature of a memb	er or authorized so	nrecontation of a	har -			
		er or authorized re	presentative of a mem	ber			

Page 3 of 3

Filing Fee: \$25.00