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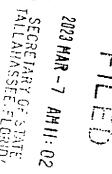
(Requestor's Name)
(Address)
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(Susiness Entity Name)
(Document Number)
: Copies Certificates of Status
: Instructions to Filing Officer;

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COVER LETTER

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wer THE	BOSSTAUCK O	WE LLC	
, 3150. (. <u></u>	Name of Line	ited Liability Company	
r unclosed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
r ne return all correspo	ndence concerning this matter	to the following:	
	JUAN MEN		
	Wy.	Madel ()	
		Firm Company	
	1158 WILDM	Address	
	WINTER PARK	(, FL. 3279Z	
	the bossTruc	(FL. 32792 City/State and Zip Code Kone@gmail.co to be used for future annual report not	nm
conther information co	E-mail address: () oncerning this matter, please co		nication)
JUAN N	1ENDIZA	at (407) 779 Area Code Daytin	3108
Name of	f Person	Area Code Daytin	ne Telephone Number
osed is a check for th	ne 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 Addres Registration S		<u>Street Address:</u> Registration Se	etion
Division of C		Division of Co	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

THE BOSSTRUCK ONE LLC. (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

amendment is submitted to amend the follows: If amending name, enter the new name of the second sec	the limited liability company here:			
w name must be distinguishable and contain the wo	. LC - rds "Limited Liability Company," the desig	nation "LLC" or the a	abbreviation "L.L.C."	
ater new principal offices address, if applical incipal office address MUST BE A STREET				
the crinew mailing address, if applicable: Sailing address MAY BE A POST OFFICE B			2023 MAR +7 F SECRETARY G	
. If amending the registered agent and/or replaced and/or the new registered office address	gistered office address on our reco <u> here</u> :	rds, <u>enter the nar</u>	me of the boy res	istered
Name of New Registered Agent:	1/52 MILL AMETING	ו פטט		
Name of New Registered Agent: New Registered Office Address:	1/58 WILDMEADOW	I RUN street address		
	1/58 WILDMEADOW Emer Florida WINTER PARK.	I RUN street address , Florida	32792 Zin Code	
	//58 WILDMEADOW Enter Florida W/NTER PARK. City	I RUN street address , Florida	32792 Zip Code	

If Changing Registered Agent, Signature of New Registered Agent

•

...nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added to emoved from our records:

ť	.1₹ =	Manager
, i	1.313 =	Authorized Member

13	Name	Address	Type of Action
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			☐ Change
			🖸 Add
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If the date	inserted in t	his block does n	ot meet the applica		juirements, this date wi	
nem s errec	tive date on	the Department	of State's records.			
rd specifies iled.	s a delayed ef	fective date, but	not an effective tin	ne, at 12:01 a.m. on th	ne earlier of: (b) The 9	0th day after the
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			Medd			

Filing Fee: \$25.00

Typed or printed name of signce