L23000115321

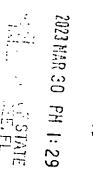
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SAGGER TYMS DOYT SERVICES 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:	
Daniel Jordan Jaddler Name of Person	
Finn/Company	
1203 & DIXIE HWY W Apt 100	
Domaino Black Fl 33000 City/State and Zip Code	6200
DT Saddler 97 (OTTUM. Com E-mail address: (to be used to diffure annual report notification)	The Control
For further information concerning this matter, please call:	متافي العدا ال
Daytime Telephone Number at 954 USS 5733 FFF 28 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Scrifficate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (Certified Copy (additional copy is enclosed))	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

The Articles of Organization for this Limited Liability Company Florida document number <u>L23000115321</u> .	y were filed on MUY (h () 2022) and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Daniel J Saddler
(Principal office address MUST BE A STREET ADDRESS)	1203 S DIXIE HAW W APHOL
	pompanoFL 33040'
Enter new mailing address, if applicable:	2 0
(Mailing address MAY BE A POST OFFICE BOX)	
The TC in the state of the stat	

B. If amending the registered agent and/or registered office address on our records, enter the mame of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Daniel J Saddle

New Registered Office Address:

203 S Dixie Hwy W Apt 100

DMANN PRACK

Domintound Ament

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.

Str. Adress

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Ambr	ROSCI CA Ambriz	1203 5 Dixie Hurymapt 1	<u>0</u> o⊐ _{Add}
		pompano Beach FL 33060	
			□Change
AMBR	Daniel J Saddler	1203 S DIXIE HMYWAPHI	Add
		pompano Beach FL	□Remove
		330100	□Change
			□ Add
			↑ BRemove
			MAChange = 1
		· S	فأ فيسده
		- · · · · · · · · · · · · · · · · · · ·	Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Rепюче

Signature of a member or authorized representative of a member

Evped or printed name of signee