L23000118815

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Decement Number)
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COVER LETTER

TO:	Registration Se Division of Cor	ction [†] porations	·	`` '3			
CUDIF		dvisors LLC.					
SUBJECT:Name of Limited Liability Company							
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
		Kelly Dvorznak					
			Name of Person	_			
			Firm/Company	_			
		300 Dunes Blvd TL 103		_			
		3410 Naple FL <u>3441110</u>	Address				
			City/State and Zip Code	_			
		ddevo8675@gmail.com		6			
For fur	ther information o	E-mail address: ((to be used for future annual report notification)	12 Ha C.3			
i or tur	aict airoimation c	oncerning this matter, piease c	air.	21			
Daniel	<u>-</u>		516 244-5590 at ()	= = = = = = = = = = = = = = = = = = =			
	Name o	f Person	Area Code Daytime Telephone Numb	10: 22			
Enclose	ed is a check for th	ne following amount:					
= \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	ate of Status &			
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section Torporations 7	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

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

Excel Biz Advisors, LLC

company has been notified in writing of this change.

The Articles of Organization for this Limited I	and assigned		
Florida document number L23000118815	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability con	<u>ipany here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Compa	iny," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		· · · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·
			2
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE	E BOX)		6
			722
B. If amending the registered agent and/or agent and/or the new registered office addressed agent. Name of New Registered Agent:		on our records, <u>enter the</u>	name of the new registered
New Registered Office Address:	300 Dunes Blvd TL 103		
registered Silice (tdd/e55).	Enter Florida street address		
	Naple ₅	, Florid	_{la} 34110
	City	,	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the	per and complete perforn gistered agent as provided	nance of my duties, and I I for in Chapter 605, F.S.	am familiar with and . Or, if this document is

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>	<u>Address</u>	Type of Action
CEO	Daniel Dvorznak	300 Dunes Blvd.	
		Naples FL 34110	■ Remove
			□Change
MGR	Kelly Dvorznak	300 Dunes Blvd. TL 103	≣ Add
		Naples FL 34110	□ Remove
			□ Change
		-	□Add
			☐Remove
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			□Remove
			□ Change

Typed or printed name of signee