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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DOSU ENTERPRISES LLC

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COVER LETTER

TO: Registration Se			
· ·	TERPRISES LLC		,
SUBJECT:		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	·
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	sullivan407@yahoo.com		
	E-mail address: (1	o be used for future annual report notifi-	cation)
For further information of	oncerning this matter, please ca	all:	
Cheyenne Moseley		800 773-0888	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Tallahassee, Ft. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOSU ENTERPRISES LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number 1.23000131087	were filed on 03/14/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
All About Curb Appeal LLC		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or	the abbreviation "L.L.C"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		702
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		nter the name of the new
Name of New Registered Agent:	······	- R
New Registered Office Address:		02
rew registered office fiduress.	Enter Florida street address	
	□ :	
	, Florid	Zip Code
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
			□ Add
			☐ Remove
			☐ Change
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			D Add
			Remove
			Chan -

D. II anvending an	ty other information, enter change(s) here: (Attach additional sheets, if necessary.)
72.00	
	if other than the date of filing: (optional)
(If an effective date	is listed, the date must be specific and cannot be prior to date of fling or more than 90 days after filing.) Pursuant to 605.0 e inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
document's effect	ctive date on the Department of State's records
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	Locald Dilli
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	Typed or printed name of signee
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