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A. RIVERS

JUL 1.7. 2023

COVER LETTER

TO:

TO: Registration Se Division of Cor					
SUBJECT: SIMONA LAZISNK ELC					
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspe	ondence concerning this matter	to the following:			
	Simona Lazinsk				
		Name of Person			
	Simona Lazinsk LLC				
		Firm/Company			
	5368 Orange Blvd.				
	2500 Grange 1714.	Address			
	(C.) 1 17 2000				
	Sanford, FL 32771	City/State and Zip Code			
	simonalazinsk@gmail.com	on the distription			
	25 17	to be used for future annual report notification)		
For further information c	oncerning this matter, please of	ali:			
Simona Lazinsk		at (954) 604-2866			
Name o	f Person	at (954) 604-2866 Area Code Daytime Telepl	none Number		
Enclosed is a check for th	ne following amount:				
휸 \$25.00 Filing Fee	(i) \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	2 S60 00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Street Address:			
Registration Section Division of Corporations		-	Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIMONA LAZISNK LLC

(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 were filed on March 27, 2023 and assigned Florida document number $\underline{L23000154024}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Simona Lazinsk, LLC the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 Simona Lazinsk	Simona Lazinsk	5368 Orange Blvd.	□ Add
		Sanford, FL 32771	□Remove
			■Change
		-	□Add
			□Remove
		· 	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
	 		□Add
			□Remove
			∏(Change

Typed or printed name of signee

Simona Lazinsk