123000155460

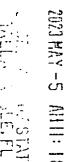
(Requestor's Name)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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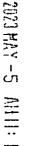
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COVER LETTER

TO:

	tion Section of Corporations		
Conf	fidence Coding LLC		
SUBJECT:	Name of	Limited Liability Company	
The enclosed Artic	cles of Amendment and fee(s) are	submitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Lisbet Blokdyk		
		Name of Person	
	Confidence Coding LL	С	
		Firm/Company	د
	16944 Bridge Crossing	Circle Address	1000 E
		Address	<
	Delray Beach, FL 3344	•	
		City/State and Zip Code	<u> </u>
	info@confidencecoding	.com	-
For further inform	E-mail addre	ss: (to be used for future annual report notification)	<u>_</u>
	lation concerning this matter, piear		
Lisbet Blokdyk		954 263-1594 at(
	Name of Person	Area Code Daytime Telephone Number	
Enclosed is a chec	k for the following amount:		
≡ \$25.00 Filing	Fee \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Gentified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing</u> Registr	Address: ation Section	Street Address: Registration Section	
	n of Corporations	Division of Corporations	
P.O. Bo		The Centre of Tallahassee	
Tallaha	ssee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Confidence Coding LLC		
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.) and Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number 123000155460	ny were filed on March 28th, 2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		21
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		5 5
Enter new mailing address, if applicable:		ည်၀ 🏊 🚦
(Mailing address MAY BE A POST OFFICE BOX)		55 S
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	e address on our records, enter the i	name of the new registere
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	n <u>t;</u>	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	ete performance of my duties, and 1 d is provided for in Chapter 605, F.S.	um familiar with and Or, if this document is
irc	hanging 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	Lisbet Blokdyk	16944 Bridge Crossing Cir	≣Add
		Delray Beach, FL 33446	□Remove
			□Change
AMBR	Patrick Blokdyk	16944 Bridge Crossing Cir	≣ Add
		Delray Beach, FL 33446	Remove
			□Change
			□Add
			Chemove Control Charge Charge Control Charge Charge Control Charge Control Charge Charg
			☐ Add ☐ ☐ Add ☐ ☐ ☐ Remove ☐ ☐ ☐ Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			∏C'hange

								
								
								
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Effective date, if an effective date in Note: If the date document's effective date	is listed, the dat inserted in the	te must be specifi his block does r	ic and cannot be not meet the a	prior to date of fi pplicable statute	ling or more than ory filing requir	(optiona 90 days after filin rements, this day	g.) Pursuant to	605.0207 (3) listed as the
record specifies d is filed.	a delayed efl	fective date, but	t not an effect	ive time, at 12:0	01 a.m. on the e	arlier of: (b) 1	he 90th day a	ister the
Dated	pril	26th	<u>2</u> t	23				
		dis	bet	Blok	dyt		<u> </u>	2023 HAY
		Signature	or a member or	authorized repre	sentarive of a me	mber	٠	
		Lis	_					ŀ

Filing Fee: \$25.00