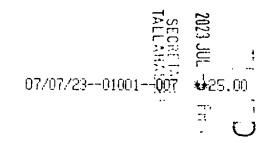
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(Req	uestor's Name)	
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COVER LETTER

TO: Registration Division of C	i Section Corporations	٠	
	E TEN LLC	-	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	Name of Person Firm/Company LOOP Address City/State and Zip Code (to be used for future annual report notification)	
Please return all corre	spondence concerning this matter	to the following:	
	HAZEL HEYER		
		Name of Person	
	BOOCLE TEN LLC		
		Firm/Company	
	112 HOLLINGS HEAD L	чоо.	
		Address	
	DAVENPORT, FL 33896		
		City/State and Zip Code	<u>-</u>
	info@protaxhelp.com	the heart and for fitting annual connect as	titi anti ant
For further informatio	on concerning this matter, please e	·	arreauor)
HAZEL HEYER			
Nan	ne of Person	Ārea Code Dayti	me Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
<u>Mailing Add</u> Registratio			ection
-	f Corporations	_	
P.O. Box 6		The Centre of	
Lattahasse	e. FL 32314	2415 N. Monn	oe Street, Suite 810

Tallahassee, FL 32303

otioop signature verification (*); (*) = 1 (*) (*) (*)

ARTICLES OF AMENDMENT

ARTICLES OF ORGANIZATION OF	÷.,		
	2023 JUL -6	$P_{I_{+}}$	

BOOCLE TEN LLC		95	
(Name of the Limited I. (A I	iability Company as it now appea forida Limited Liability Company)	ars on our records of	AHASSI:
The Articles of Organization for this Limited Liabil	lity Company were filed on _	04/03/2023	and assigned
lorida document number	·		
his amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company b	<u>uere</u> :	
he new name must be distinguishable and contain the words	"Limited Liability Company," the	designation "LLC" or th	ne abbreviation "L.L.C."
inter new principal offices address, if applicable	e:		
<u>Principal office address MUST BE A STREET A</u>	DDRESS)		
Enter new mailing address, if applicable:			
<u> Mailing address MAY BE A POST OFFICE BO.</u>	<u></u>		
 If amending the registered agent and/or registent and/or the new registered office address had 		records, <u>enter the r</u>	name of the new regist
			
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Addicas.	Enter Flo	orida street address	
		Florida	ı
_	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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.

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	HAZEL HAYER	112 HOLLINGS HEAD LOOP	
		DAVENPORT, FL 33896	■Remove
			□Change
MGR	MGR HAZEL HEYER	112 HOLLINGS HEAD LOOP	= Add
		DAVENPORT, FL 33896	□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			⊡Remove
			□ Change
			□Add
			□Remove
			
			□Change

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ecord specit	īes a delayed c	effective date, bu	ut not an effective time, a	it 12:01 a.m. on the earl	ier of: (b) The 90th da	y after th
	07/05		2023			
ted			··			
ted	.,,,,,,		Hazel Heyer	dotlogp yenf ed 07/05/23 9 37 AM DUPM-BUOT H32	ED:	