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2023 APR 24 PH K

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT:	Miltons Laur		
	Name of Limi	ited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are sub-	mitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	
	Doneth	2 R. Johnson Name of Person	
		Firm/Company	
	6844 Morris	Address	
	Milton, FL 3	City/State and Zip Code	
	Conette Consc 1:-mml address: (	to be used for future annual report notities	ration)
For further informa	ntion concerning this matter, please co	all:	
Donette	R Johnson	at ( <u>706</u> ) <u>358 · Y</u> Area Code Daytime	89 7 Telephone Number
Enclosed is a check	k for the following amount:		
[] \$25.00 Filing I	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	[] \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Address: ation Section to of Corporations	<u>Street Address:</u> Registration Sect Division of Corp	

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF	ORGANIZATION		<b>(D</b>
	OF	2023 APR 24 PM	D = D
		OZJAPR 24 PL	4.
Milton Louisdroima (Name of the Limited Liability Com (A Florida Limite	at LLC	TALLER IN	<u>U</u> 2: <sub>.(*)</sub>
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our d Liability Company) — — T	<del>SECKER</del> AGY A ET All ahasors	
	m. Δα.i	1741 7017	
The Articles of Organization for this Limited Liability Compar	iy were filed on MPTI	11.6 '9(1) 9 11.6 11.6 11.6 11.6 11.6 11.6 11.6 11	ind assigned
Florida document number <u>L.23CCO19C9C</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lis	ability company here:		
Miltons Laundra mat 1	\ (		
Miltons Laundra met L The new name must be distinguishable and contain the words "Limited Lia	hility Company," the designation	on "LLC" or the abbrevial	tion "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)			
	•		
B. If amending the registered agent and/or registered offic	e address on our records	, enter the name of t	he new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			<u></u>
New Registered Office Address:			
	Enter Florida strec	ri address	
•		, Florida	
	City	— Ziji	r Cade

## 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, <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>	Address	Type of Action
MGR	Donette l'Ionson	6844 Marison Rd Milton FL	3778 <u>37</u> 7Vqq
			□Remove
			□Change
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(If an effective Note: 1	e date, if other than the date of filing:
he record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the d.
Dated <u>&lt;</u>	Jori 1 244 2023.
	Signature of a member or authorized representative of a member
	Typed or printed name of signee