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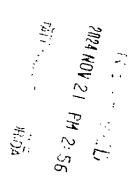
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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200439717362 11/21/24--01001--016 **25.00



COVER LETTER

FO: Registration Se Division of Co		
SUBJECT: Desig	Name of Limited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.	
Please return all correspo	condence concerning this matter to the following:	
	Erica Betancur	
	Name of Person	
	Firm/Company	
	119 Eagle Nest Lana	
	E-mail address: (to be used for future annual report notification)	
For further information of	Name of Limited Liability Company sed Articles of Amendment and fee(s) are submitted for filing. turn all correspondence concerning this matter to the following: Erica Betancy Name of Person Firm/Company 119 Eagle Nest Lang Address Crantoraville FL 32327 City/State and Zip Code Mawias 44@ grain	
Michael Hav		
Enclosed is a check for t	the following amount:	
\$25.00 Filing Fee	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	of Status & Copy

Mailing Address:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Dossigns By Hawk, LLC	
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
	y were filed on 4 4 2023 and assigned
Florida document number <u>L23000205344</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	me, enter the new name of the limited liability company here: Marchs LLC distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." al offices address, if applicable:
King of Wards, LLC	and assigned Bimited liability company here: Limited Liability Company," the designation "LLC" or the abbreviation "LLC" LIFE FAGIC NEST LAND DDRESS) LIFE FAGIC NEST LAND Crawfordville, FL 32327 LIPE FOXYE NEST LAND Crawfordville, FL 32327 ered office address on our records, enter the name of the new registered re: FIGUR NEST LAND Enter Florida street address FAGICA STREET ADDRESS FAGI
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	119 Fagle Nest Lane
(Principal office address MUST BE A STREET ADDRESS)	Crawfordille, FL 32327
Enter new mailing address, if applicable:	119 FOXIP NEST LAND
(Mailing address MAY BE A POST OFFICE BOX)	Crawfordville, FL 32327
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: Frica	M. Betancur
New Registered Office Address: 119 Eac	Enter Florida street address
Crawton	AVILLE, Florida 32327 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, <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
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			□Remove
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cord spe s filed.	ecifies a delayed effective date, but not an e	ffective time, at 12	:01 a.m. on the earlie	r of: (b) The 90th day	y after the
cd <u>II</u> ,	/21/24	·			
	Michael E Designature of a momb	er or authorized repr	esentative of a member	· · · · · · · · · · · · · · · · · · ·	 -
	Michael E. Hawk				