## L23000249779

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2024 JAN 17 PH 2:24

## **COVER LETTER**

TO: Registration Secti Division of Corpo	on crations		· .	•
SUBJECT: <u>Brand</u>			• • • • • • • • • • • • • • • • • • • •	·
SUBJECT: DRANDE	Name of Limi	ted Liability Company	_	
	THE OF TAIN	con that they company		
The enclosed Articles of An	nendment and fee(s) are subr	mitted for filing.		
Please return all corresponde	ence concerning this matter t	o the following:		
	Robert John	Brindenstein Ja. Name of Person		_
	Brande R L			
		Firm/Company		205 - SE
	1210 Par 11.	11 0-		13.74 14.74 14.74
	15/0 reachtie	Address		
	1.1.			
	Valoreo Fl	33596		
		Address  - 33596  City/State and Zip Code		ON JAN 17 PM 2:25
•	E-mail address: (to	o be used for future annual report notif	ication)	, , , _
For further information conc	cerning this matter, please ca	II:		
Robert J Brun	donstein Ja.	at (8/5) 638 Area Code Daytime	22/0	
Name of Pe	erson	Area Code Daytime	Telephone Numbe	r
Enclosed is a check for the f	2			
□ \$25.00 Filing Fee 4	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &
Mailing Address:		Street Address:		
Registration Sec Division of Corp		Registration Sec		
P.O. Box 6327	, , , , , , , , , , , , , , , , , , ,	Division of Corp The Centre of Ta		
Tallahassee FI	32314	2415 N. Monroe		210

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Srander LLC (Name of the Limited Liability Compa	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company  Florida document number $\angle 2300249779$	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
TI T	
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable:	1310 Peachfield dry 2 Valvice FL 335955
(Principal office address MUST BE A STREET ADDRESS)	Valivo FL 33596 ?
Enter new mailing address, if applicable:	P. P.
(Mailing address MAY BE A POST OFFICE BOX)	
	Ushn BrandersTein Jr ench field Da Enter Fiornia street address
Valrico	City Sip 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.

H 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>	<u>Address</u>			Type of Action
AMBR	Robert John	Brandenstein JR. 131	10 Auchfiel	d Or	toAdd
		<u></u>	rico FL	33596	□Remove
					□Change
MGR	Robert John	Brandonstein 1	310 Pench	rfield D	<u>N.</u> □ <b>h</b> dia
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## Page 2 of 3

Effective date, if other than the date of filing: Nov. 11, 2023 (optional)  If an effective date is listed, the date must be specified and cannot be prior to date of filing or more than 90 days when filing.) Pursuant to 605.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed adocument's effective date on the Department of State's records.  The 90th day after the record is filed.  Dated Northern Signature of a member or authorized representative of a member.									<del></del>		
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