## L23000257626

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## **COVER LETTER**

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rs LLC		
Name of Lim	ited Liability Company	<del></del>
Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
Randy Llanes		
-	Name of Person	
	N	
	• •	
3836 SW 187th Loop Unit		
Ocolo El 34473	Address	
	City/State and Zip Code	
	•	
		ification)
oncerning this matter, please c	all:	
	352 789-9500 at ()	ie Telephone Number
of Person	Area Code Daytin	ie Telephone Number
he following amount:		
■ \$30.00 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)
Mailing Address: Registration Section		ection
Corporations	Division of Co	rporations
	Porations  rs LLC  Name of Lim  Amendment and fee(s) are sub  andence concerning this matter  Randy Llanes  E-mail address: ( Poncerning this matter, please of Person  the following amount:  \$\Begin{align*} \text{S0.00 Filing Fee & Certificate of Status}  \end{align*}	Name of Limited Liability Company  Amendment and fee(s) are submitted for tiling.  Indence concerning this matter to the following:  Randy Llanes    Name of Person

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa- (A Florida Limited I	ny as it now appears on our reco liability Company)	rds.)						
ne Articles of Organization for this Limited Liability Company were filed on $\frac{05/25/2023}{1.23000257626}$								
his amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limited liab	ility company here:							
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "Ll	LC" or the abbreviation "L.L.C."						
Enter new principal offices address, if applicable:		; ·						
Principal office address MUST BE A STREET ADDRESS)		بي <b>و</b> ريا						
	<del></del>							
		-						
inter new mailing address, if applicable:		D						
Mailing address MAY BE A POST OFFICE BOX)								
<ol> <li>If amending the registered agent and/or registered office agent and/or the new registered office address here:</li> </ol>	address on our records, <u>ent</u>	er the name of the new regis						
Name of New Registered Agent:								
New Registered Office Address:	Enter Florida street add	ress						
	, Florida							
<del></del>		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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Randy Llanes	3536 Sw 157th loop	
		Unit A	□Remove
		Ocala, FL 34473	☐ Change
			□Add
			□Remove
			□Change
			□Add
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Signature of a member or authorized representative of a member												
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