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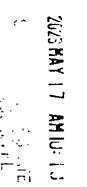
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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(Document Number)				
Certified Copies Certificates of Status				
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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the form and instructions to amend the Articles of Organization of a Florida Limited Liability Company.

A limited liability company can amend its articles of organization by filing articles of amendment with the Division of Corporations that meet the requirements of s. 605.0202, Florida Statutes, which is printed on the reverse side of this letter.

- Pursuant to s.605.0202 (2)(d). Florida Statutes, the document must be typed or printed and must be legible.
- Pursuant to s. 605.0207, Florida Statutes, an effective date may be specified but it must be specific, cannot be prior to the date of filing, and cannot be more than 90 days in the future.
- It you are changing the name of the limited liability company, the new name must be distinguishable on the records of the Florida Department of State.

The new name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC."

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

If the registered agent is changed by the amendment, the new agent must sign accepting the appointment, and must state that he or she is familiar with and accepts the obligations of the position. Additional sheets may be attached if necessary.

The fees are as follows: \$25.00 Filing Fee

\$30.00 Certified copy (optional) \$ 5.00 Certificate of Status (optional)

Submit one check made payable to the Florida Department of State for the total amount of the filing fee and any certificate or copy. Please include a cover letter containing your daytime telephone number and return address. A letter of acknowledgment will be issued after the amendment has been filed.

Any further inquiries on this matter should be directed to the Registration Section by calling (850) 245-6051, or by writing Division of Corporations, P. O. Box 6327, Tallahassee, FL, 32314.

NOTE: THIS FORM FOR FILING ARTICLES OF AMENDMENT IS BASIC. EACH LIMITED LIABILITY COMPANY IS A SEPARATE ENTITY AND AS SUCH HAS SPECIFIC GOALS, NEEDS, AND REQUIREMENTS. ADDITIONAL SHEETS MAY BE ATTACHED AS REQUIRED.

THE DIVISION OF CORPORATIONS RECOMMENDS THAT ALL DOCUMENTS BE REVIEWED BY YOUR LEGAL COUNSEL. THE DIVISION IS A FILING AGENCY AND AS SUCH DOES NOT RENDER ANY LEGAL, ACCOUNTING, OR TAX ADVICE. THE PROFESSIONAL ADVICE OF YOUR LEGAL COUNSEL TO ASCERTAIN EXACT COMPLIANCE WITH ALL STATUTORY REQUIREMENTS IS STRONGLY RECOMMENDED.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SLAYEDBYLIYAH		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our rec Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company	were filed on 04/17/2023	and assigned
Florida document number $\frac{W23000055583}{230026}$	446	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SLAYEDBYLIYAH LLC		
The new name must be distinguishable and contain the words "Limited Liabi"	lity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		623
		H T
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		© > ∏
the state of the s		
		7-2,
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		.
New Registered Office Address:		
	Enter Florida street ad	dress
	,	Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	ee to act in this capacity	l further agree to comply with the , and I am familiar with and

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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Kamaria Williams	1156 NE Bascom Norris	■Add
		Lake City, FL 32055	□Remove
			□Change
			≣ Add
			□ Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
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			☐ Change
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			□Remove
			□Change