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MAJ SEP 19 PM 12 SAUSSEP 19 PM 12:

A. RAMSEY SEP 19, 2023

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Thee Next Level LLC
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rahim L. Cook Name of Person
Thee NexT Level LLC Firm/Company
1120 62nd Terrace South
ST. Petelsborg FL. 33705 City/State and Zip Code
E-mail address: (to be used for inture annual report notification)
For further information concerning this matter, please call:
Rahim L. COOK at (727) 451-0067 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)

Mailing Address: 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

FILE	D
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Thee Ne	ext Level	2023 SEP 19 PM 12 59				
(<u>Name of the Limited Liab</u> (A Flor	pility Company as it now appears o rida Limited Liability Company)	n our records:) KY OF LAND				
The Articles of Organization for this Limited Liability Florida document number 2230002769	Company were filed on 4	$\frac{17/23}{2}$ and assigned				
This amendment is submitted to amend the following:						
A. If amending name, <u>enter the new name of the li</u>	mited liability company here					
The new name must be distinguishable and contain the words "L	imited Liability Company." the desig	mation "LLC" or the abbreviation "LLC."				
Enter new principal offices address, if applicable:						
Principal office address MUST BE A STREET ADD	DRESS)					
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or register agent and/or the new registered office address here		rds, <u>enter the name of the new registered</u>				
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Florida street address					
	City	Florida 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 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	Rahim L. Cook	1120 Gard resigne sou	ZiXAdd
		ST. Petersburg FL.3	3705 □ Remove
			□ Change
AMBR	SUNDRA BROCK	1120 62Nd Tessace S	
		ST. Petersburg FL.3	37 <i>8</i> 5⊡Remove
			□ Change
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