## L23000289957

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2023 AUG -7 KH 7: 2



## **COVER LETTER**

Div	ision of Cor	porations		
CUD ENCYT.	EDENJOI L			
SUBJECT:			ited Liability Company	
The enclosed	I Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		EDEN JOI PETERSON		
			Name of Person	
		EDENJOLLLC		
			Firm/Company	.,u. <u></u>
		13520 SW 136TH TER		
			Address	
		MIAMI, FL 33186		
			City/State and Zip Code	
		JUSEDEN18@GMAIL.CO  E-mail address: (	to be used for future annual repo	ort notification)
For further in	nformation co	oncerning this matter, please c	all:	
EDEN JOI I	PETERSON		305 205-76	
	Name of	f Person	Area Code	Daytime Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 F	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres gistration S		<u>Street Addr</u> Registratio	

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

TO:

Registration Section

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 9899 AUG. 7

2023 AUG -7 AM 7: 22 EDENJOI LLC

(Name of the Limited Liability (A Florida	y Company a Limited Liabi	it now appears on our ity Company)	records.)	<del></del>
The Articles of Organization for this Limited Liability Co- Florida document number L23000289957	ompany wer 	e filed on JUNE 15.	2023	and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability	company here:		
he new name must be distinguishable and contain the words "Limit	ited Liability C	ompany," the designatio	n "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDR	ESS)			
Enter new mailing address, if applicable:	_			
Mailing address MAY BE A POST OFFICE BOX)				
	_			
B. If amending the registered agent and/or registered gent and/or the new registered office address here:  Name of New Registered Agent:	l office addi	ess on our records,	enter the name	of the new registe
New Registered Office Address:				·
		Enter Florida street	address	
			, Florida	
		City		Zip Code
New Registered Agent's Signature, if changing Registered	1 Agent:			
hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	o <mark>mplete per</mark> gent as prov	f <mark>ormance</mark> of <mark>my dut</mark> ided for in Chapter	ies, and I am fa 605, F.S. Or, ij	miliar with and this document is
	If Changing	Registered Agent, Sign	nature of New Regis	tered 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>	Name	Address	Type of Action
MGR	DOREEN PETERSON	13520 SW 136TH TER MIAMI, FL 33186	🗅 Add
			Remove
			Change
MGR	EDEN JOI PETERSON	13520 SW 136TH TER MIAMI, FL 33186	<b>≣</b> Add
			□Remove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
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to material distance of the control of the	date of filing:  st be specific and cannot be priock does not meet the app.	ior to date of filing or more the licable statutory filing rec	(optional) han 90 days after filing.) F quirements, this date w	tursuant to 605.020 ill not be listed as
n effective date is listed, the date must te: If the date inserted in this bl				
n effective date is listed, the date must te: If the date inserted in this bl	epartment of State's record	ds.		
n effective date is listed, the date muste:  If the date inserted in this blument's effective date on the Decord specifies a delayed effective.	epartment of State's record		ne earlier of: (b) The !	90th day after the
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n effective date is listed, the date muster: If the date inserted in this bl cument's effective date on the D ecord specifies a delayed effectivities filed.	epartment of State's record		ne earlier of: (b) The	90th day after the

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