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Office Use Only

COVER LETTER

TO: **Registration Section Division of Corporations**

Mimizan LLC. Name of Limited Liability Company SUBJECT:

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

at (50) 542-55 (4) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$\$\$25.00 Filing Fee

□ \$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 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



August 23, 2023

SHERRY BAGSHAW 613 RITTENHOUSE COURT WINSTON SALEM, NC 27104

SUBJECT: MIMIZAN LLC Ref. Number: L23000305032

We have received your document for MIMIZAN LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The first page of the Articles of Amendment is not complete. It also appears to be a copy. I am enclosing a new page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 623A00019603

TO 2023 DEC - 8 AM 19 OF International Control of the control	- ARTICLES OF AMENDMENT	FILE	ΞD
OF TALLAHASSEE, FLi Tal		,	
The Articles of Organization for this Limited Liability Company were filed on $09/12/2023$ and assigned Florida document number 4230003057832 . This amending name, <u>enter the new name of the limited fiability company here</u> : The amending name, <u>enter the new name of the limited fiability company here</u> : The new name must be distinguishable and contain the words "Limed Liability Company." the designation "L1" of the gbherstation "L1.0" Enter new principal offices address, if applicable: <i>10695 [Joid] [Loid2] J.</i> . <i>[Principal office address MUST BE A STREET ADDRESS]</i> Enter new mailing address, if applicable: <i>[Mailing address MAY BE A POST OFFICE BOX]</i> B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered agent and/or segistered office address on our records, <u>enter the name of the new registered</u> <i>[Box] [Jox] [Jox] [Jox] [Joy] [Joy]</i>	Mimizan L.L.C.	TALLAHASSEE	F STA Flor
Florida document number 229903057832 . This amendment is submitted to amend the following: A. If atmending name, <u>enter the new name of the limited fiability company here</u> : The new name must be distinguishable and contain the words "Limited Liability Company." the designation "L1," or the abbreviation "L1," Enter new principal offices address, if applicable: <i>(Principal office address MUST BE A STREET ADDRESS)</i> Enter new mailing address, if applicable: <i>(Mailing address, if applicable:</i> <i>(Mailing address, if applicable:</i> <i>(Mailing address, if applicable:</i> <i>(Mailing address, MUST OFFICE BOX)</i> B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered address</u> : <i>[Josk5] (Mail) Logy] (Logy]</i> Name of New Registered Agent: <i>New Registered Office Address</i> : <i>[Josk5] (Mail) Logy] (Logy] (Logy]</i> New Registered Agent's Signature, if changing Registered Agent: <i>(Inter the one of the proper and complete performance of my dates, and 1 am familing with the provisions of all statutes relative to the proper and complete performance of my dates, and 1 am familing with and accept the other program and complete performance of my dates, and 1 am familing with and accept the other program and complete performance of my dates, and 1 am familing with and accept the other program and complete performance of my dates, and 1 am familing with and accept the other program and specified agent as previded for in Changter 005, F. Or., if this document is been field to a change in the registered agent as previded for in Changter 005, F. Or., if this document is been field to the program and complete performance of my dates, and 1 am familing with and accept the other program accept agent as previded for in Changter 005, F. Or., if this document is been field to the program and complete performance of my dates, the coly completer of the field commune is begistereed agent as previded for in Changter 005, F. St. Or</i>		and assigned	
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p. 11 amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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Dated		
Signature of a member of authorized representative of a member SHERKY BACSHAW Typed or printed name of signee		

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Filing Fee: \$25.00