L23000308792

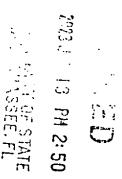
| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| į |
| |
| |
| |

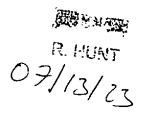
Office Use Only



800411812908

07/13/23-+01006-+005 **25.00





COVER LETTER

TO:

Registration Section Division of Corporations

| SUBJECT: S & | TASHA +11 | OMES LLC | | |
|---------------------------------|--|--|--|---------------------------------------|
| | Name of Lim | ited Liability Company | | |
| | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing | | |
| Please return all correspon | ndence concerning this matter | to the following: | | |
| | Jana | Carabino Name of Person | | |
| | | | | |
| | | Firm/Company | | , , , , , , , , , , , , , , , , , , , |
| | 1811 NE 20 | th Ave | 2.75 197, | : |
| | | | (S) | 13 PH 2: 50 |
| | Ft Lauderda | City/State and Zip Code Components Compo | 305 | . ± . |
| | 1-: -1010 | City/State and Zip Code | (, L | 50 |
| | E-mail address; | to be used for future annual report noti | fication) | |
| For further information co | oncerning this matter, please ca | ali: | | |
| Jana Carc | ubino | .860. 377. | -8141 | |
| Name of | Person | at (860) 377 Area Code Daytim | e Telephone Number | - |
| | | | | |
| Enclosed is a check for th | e following amount: | | | |
| \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S55,00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60,00 Filing Description Certificate of Certified Copy (additional copy) | Status & v |
| | | | | |
| Mailing Addres | | Street Address: | ation. | |
| Registration S Division of C | | Registration Se Division of Cor | | |
| P.O. Box 632 | 7 | The Centre of 1 | allahassee | |
| Tallahassee, F | L 52514 | 2415 N. Monro | e Street, Suite 810 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| S & 1 ASHA HON | _ | |
|--|--|---------------------------------------|
| Name of the Limited Liability (A Florida I | Company as it now appears on ou imited Liability Company) | r records.) |
| The Articles of Organization for this Limited Liability Co Florida document number <u>L23000308792</u> | mpany were filed on <u>U</u> 27 | 1/23 and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limit | ed liability company here: | |
| The new name must be distinguishable and contain the words "Limite | ed Liability Company," the designation | on "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRE | <u></u> | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | PH 2: |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | office address on our records | , enter the mame of the new register |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida stree | et address |
| | | Florida |
| | City | 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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------|--|-----------------------------|
| 149R | Jana Carabino | 1811 NE 20+1 Ave | XAdd |
| | | 1811 NE 20th Ave Fe. Landerdale, FL 33305 | |
| | | | □Change |
| | | | |
| | | | □Remove |
| | | | Change |
| | . | AH Y SSS | —⊕Add |
| | | FL | Change Add Remove Change |
| | | | ∃Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |

| | | | | | | | | | - |
|--------------------------|---|---------------------------------------|----------------------------------|--|---------------------------------------|---|-------------|------------------|--------|
| | . | · · · · · · · · · · · · · · · · · · · | | | | | | | - |
| | _ | | | | | | | | - |
| | | | | | | | | | - |
| | | | | | | | | | - |
| | | | | | | | | | - |
| | | | | | | | | | - |
| | | | | | | | | | _ |
| | 128 1 | | | | | | | (2) (2) | _ |
| | | | | | | <u>1</u> | | ದು | |
| | | | | | | ر و ما ما ما ما ما ما ما ما ما ما ما ما ما | .i | <u>.</u> ن | |
| | | - | | | | 1. | | P i | - • |
| · <u> </u> | | | | | | سا ئىر | · C> | о - { | |
| | | <u> </u> | | | · · · · · · · · · · · · · · · · · · · | · | <u> </u> | Š | - |
| | | | | | | | | | - |
| | | | | | | | <u>.</u> | | _ |
| | | | | | | | | | _ |
| effective o e: If the | ate, if other than date is listed, the date date inserted in this effective date on th | must be specific a block does no | and cannot be protected the capt | ior to date of fili dicable statuto | | |) Pursua | | |
| cord spec s filed. | rifies a delayed effe | ctive date, but r | юt an effectiv | e time, at 12;0 | l a.m. on the ear | lier of: (b) T | he 90th | day afte | er th |
| ે | July | 10 | 2023 | | | | | | |
| - | | Signature of | a member or a | uthorized repres | entative of a memb | er | | | |
| | | | | | | | | | |