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COVER LETTER

Division of Cor		<i>C</i> .,	
SUBJECT:	Name of Limi	ted Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	ndence concerning this matter	o the following:	
	AUTONE.	Name of Person Externe S Firm/Company	
	<i>5</i> \	Name of Person	·····
	ELITE	EXTERTOR S	OWTOUS LLC
	22-11 No2	TH HOUNTE ST	
		Address	1
	TALLATHASSEE	FC 32303	
		City/State and Zip Code	
	COUTACTUS E-mail address: (1	o be used for future annual report notif	DESCUTTOUS TOUS TOOL CEN
For further information c	oncerning this matter, please ca	ill:	
Autour	O JOHUSON IL	at (<u>448</u>) <u>SOCO</u> Area Code Daytimo	4678
wante o	reson	Area Code Dayrimo	e Telephone Number
Enclosed is a check for the	he following amount:		
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

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**

- CETTE EXTENTE SOLUT	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)
The Articles of Organization for this Limited Liability Company were filed	on and assigned
Florida document number <u>L2300037291 (c</u>	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	ny here:
The new name must be distinguishable and contain the words "Limited Liability 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)	~3_
	3
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	•
	757
	i de la companya de
B. If amending the registered agent and/or registered office address on agent and/or the new registered office address here:	our records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
New Registered Office Address:	
En	er Florida street address
	, Florida
City	Zip Code
lew 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
<u>AH30</u>	HAYRE BELL	2041 North Honor	
		TALLANTASSIEG, FL 325-5	PRemove
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			□Add
			□Remove
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			□Add
			Remove
		· 	Change
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- 4	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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'an effe <u>fote:</u> I	we date, if other than the date of filing: ///5/23 (optional) ictive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020' If the date inscrted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
record I is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated _	NOVELIBER 15 2023
•	Signature of a member or authorized representative of a member
	Typed/or printed name of signee

Filing Foot \$25 M