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Office Use Only



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SECRETARY OF STATE
TALLAHAS SEE, FI

TO: Registration Section **Division of Corporations** 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: Thirty M. Medina-Servano at (35) 451-5359
Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

Mailing Address;

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

Street Address:

(additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy

(additional copy is enclosed)

TO ARTICLES OF ORGANIZATION OF

(ACCIONAL EMINIOS E	J
The Articles of Organization for this Limited Liability Company	were filed on U 4 10, 2023 and assigned
Florida document number <u>L 23000.32.5434</u> .	J-J
Tiorida document number = 200000000000000000000000000000000000	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abore vialed "L.L.C."
Enter new principal offices address if applicables	2013 Palmetto St = T
Enter new principal offices address, if applicable:	Unit #2 PP 2
(Principal office address MUST BE A STREET ADDRESS)	
	middleburg Fl532068
	DA DAV 3
Enter new mailing address, if applicable:	P. O. BOX 2 77 78
(Mailing address MAY BE A POST OFFICE BOX)	middlebury +1 32050-0002
B. If amending the registered agent and/or registered office a	address on our records, enter the name of the new registered
agent and/or the new registered office address here:	
6/	irley W. Medina-Semano
Name of New Registered Agent: 5h	1 1 1 Cl
New Registered Office Address: 2073	3 Kalmetto St Unit#2
	Enter Florida street address
model	ebura Florida 32068
	City J Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and I am familiar with and 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

H Changing Registered Agent. Signature of New Registered Agent

company has been notified in writing of this change.

MGR = M $AMBR = A$	lanager uthorized Membe	۲r			
<u>Title</u>	<u>Name</u>		Address		Type of Action
MGR	Shirley R	1. Medina-Servano	2073 Palmett Unit#2	05+	_ 🗹 🗖 Add
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or removed from our records:

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tive date, if other than the date of filing: [Feetive date is listed, the date must be specific and cannot be prior to date of		
If the date inserted in this block does not meet the applicable statement's effective date on the Department of State's records.	utory filing requirements, this date v	vill not be listed
rd specifies a delayed effective date, but not an effective time, at 1 iled.	2:01 a.m. on the earlier of: (b) The	90th day after
1 1		
July 10 2023	_	
Singly My Sedie Signature of a member or authorized rep	. = (211.00)	