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2023 AUG 23 AM 8: 2 SECRETARY OF STATE TALLARIAGE FOR

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT: <u> </u>		· LLC		
	'Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Carolyn	L Braddy Name of Person		
		Firm/Company		
	6201 110th	AVE N.	SECC TA	2n73
		Address	LLAIE	7073 AUG 23 AM 8: 25
		OLLYY, FL 33710 City/State and Zip Code		
	7. L.C Enterp E-mail address:	OVISESTE QUALL CO	OM MA	8: 25
For further information co	oncerning this matter, please c	all:	rri	O.
Caraly	nlBraddy	at ( <u>727</u> ) <u>Lol 252</u> Area Code Daytime	21	
Name of	Person	Area Code Daytime	e Telephone Number	
Enclosed is a check for th	e 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 State Certified Copy (additional copy is enco	
Mailing Address Registration S Division of C P.O. Box 632	Section orporations 7	Street Address: Registration Sec Division of Cor The Centre of T	porations allahassee	
Tallahassee, F	FL 32314	2415 N. Monroe	e Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Co	mpany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp	any were filed on 81112025 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and contain the words "Limited I.	liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8270 Woodland Winter Blud
(Principal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Los DI Hoth Ave Nis & J St. Petersburg, FL 33700
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street 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>	Name	Address	Type of Action
lanager	Carolyn L Braddy	LOSDI 16th Ave N	🗹 Add
		LOSDI 16th Ave N St. Petersburg, FL 33710	□Remove
			Change
			🗆 Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
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iote: If the date	f other than the d s listed, the date must b inserted in this bloc tive date on the Dep	k does not n	eet the appl	icable statu	filing or more tory filing re	han 90 days :	<b>ptional)</b> ifter filing.) F this date w	ursuant ill not b	to 605.020 oe listed a
record specifies is filed.	a delayed effective of	late, but not	an effective	time, at 12	:01 a.m. on t	he earlier of	(b) The	90th da	y after the
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		KAO	Ldv	)					<del></del>
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