

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAMILA NATALIA JANVIER LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Kerven Janvier
Name of Person

Distinct Wealth
Firm/Company

436 Winghurst Blvd
Address

Orlando FL 32828
City/State and Zip Code

kervenjanvier@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kerven Janvier at 407 802.0729
Name of Person 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

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

CAMILA NATALIA JANVIER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2024 JUL -5 11:11 AM

The Articles of Organization for this Limited Liability Company were filed on August 8th 2023 and assigned

Florida document number L23000371744.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Distinct Legacy Solutions L.L.C

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:

7380 W Sand Lake Rd Suite 600

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32819

Enter new mailing address, if applicable:

7380 W Sand Lake Rd Suite 600

(Mailing address MAY BE A POST OFFICE BOX)

Orlando FL 32819

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

7380 W Sand Lake Rd Suite 600

Enter Florida street address

Orlando

Florida

32819

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>	<u>Address</u>	<u>Type of Action</u>
AR	Talya Janvier		<input type="checkbox"/> Add
		1139 Crane crest way Orlando FL 32825	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Kerven Janvier		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		380 W Sand Lake Rd Suite 600 Orlando FL 32819	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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