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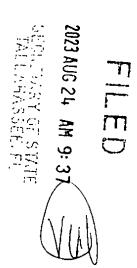
(Re	equestor's Name)	
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	Registration So Division of Cor			. 4
		ROUP LLC		
SUBJI	ECT:	Name of Lim	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		JORGE LAVOY		
			Name of Person	
			Firm/Company	
		8025 BAYMEADOWS C	IR E APT 1804	
			Address	
		JACKSONVILLE / FL 32	256	
		MODERAL AVOVEDAND	City/State and Zip Code	
		JORGE@LAVOYGROUP	to be used for future annual report n	otification)
For fur	ther information c	oncerning this matter, please c	·	
JORG	E LAVOY		305 8572326	
	Name o	t Person	Area Code Dayt	ime Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S		Street Address: Registration S	iection
	Division of C	orporations	Division of C	orporations
	P.O. Box 632 Tallahassee, 1		The Centre of 2415 N. Mon	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabil) (A Florid	ity Company as it now appears on ou a Limited Liability Company)	r records.)	
The Articles of Organization for this Limited Liability C Florida document number <u>L23000383521</u>			_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the lim</u>	nited liability company here:		
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designat	ion "LLC" or the abbr-	eviation "L.L.C."
Enter new principal offices address, if applicable:		63	20.
(Principal office address MUST BE A STREET ADD	<u> </u>	<u> 20</u>	-
		5-1	#UG 2
		5 2	12
Enter new mailing address, if applicable:		One) En	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
Mining damess Mill BEATTON OF THOSE BOTT			37
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		s, <u>enter the name</u>	of the new regist
Name of New Registered Agent:			
New Registered Office Address:			
- -	Enter Florida str	eet address	
		Florida	
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with t 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 addeor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
		. <u>-</u>	□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
		 	□Add
			□Remove
			□Change
	 		□Add
			□Remove
			Change
			
		 	□Remove
			□Change

<i>,</i>	ACTIVITY:
	Lavoy Group engaged in providing advice and
_	assistance to businesses and other organizations on management issues, such as strategic
	and organizational planning; financial planning and budgeting; marketing objectives and
	policies.
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<u>te:</u>	ve date, if other than the date of filing:
s fil	
ed	08/18/ . 2023
	, i
	Signature of a member or authorized representative of a member

1 . . .

Filing Fee: \$25.00