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02/23/24

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Division of C				
AIM wit	h AIMEE. LLC			
SUBJECT:	Name of Lin	nited Liability Company		-
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	David L. Paul			
		Name of Person		_
	Rosende Velez & Paul PL	LC	ual report notification)	
		Firm/Company		_
	8200 NW 41st St, Suite 3	18		•
		Address		-
	Miami, Fl. 33166			
	 -	City/State and Zip Code	 -	
	david@rvplawyers.com			:.: : :::::::::::::::::::::::::::::::::
		to be used for future annual report no	tification)	, on
For further information	concerning this matter, please e	all:		;·. 1
David L. Paul		305 701-2099		
Name	of Person	Area Cude Daytin	me Telephone Numbe	er
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)	Certifie	ate of Status &
Mailing Addre		Street Address:		
	Section Corporations	Registration Se Division of Co		
P.O. Box 63		The Centre of	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AIM with Aimee, LLC	3 41 3 19 C			
(Name of the Lin	(A Florida Limited	pany as it now appears o d Liability Company)	on our records.)	
The Articles of Organization for this Limited Florida document number L23000408469		by were filed on $\frac{8/307}{1}$	2023 and assig	ned
Plorida document number	·			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited lia	bility company here	;:	
AIM WITH AIIME LLC				
The new name must be distinguishable and contain the	words "Limited Lial	bility Company," the desig	gnation "LLC" or the abbreviation "L.L.C	C."
Enter new principal offices address, if applicable:		4040 Del Prado S CAPE CORAL, FL 33904		
(Principal office address MUST BE A STRE	ET ADDRESS)	-		
			<u> </u>	<u> </u>
Enter new mailing address, if applicable:		4040 Del Prado S (CAPE CORAL, FL 33904	
(Mailing address MAY BE A POST OFFICE BOX)			: : ::: :::: ::::::::::::::::::::::	
			1.1	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office ess here:	address on our reco	ords, enter the name of the new r	egis
Name of New Registered Agent:	Rosende Velez & Paul PLLC			
New Registered Office Address:	8200 NW 41s	t St, Suite 318		
	Enter Florida street address			
	Miami		, 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			□Change
			Add
			□Remove
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ecord specifies is filed.	a delayed effective	date, but not	an effective	time, at 12:	01 a.m. on the	earlier of: (b	The 901	h day after th
February 2 ited	23		2024		>			
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Filing Fee: \$25.00