

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: O.E. CREATIONS2
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:

Dwayne denard Johnson
Name of Person

Firm/Company

4387 paraglider place
Address

Wesley Chapel FL 33545
City/State and Zip Code

D.E. Creations29@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tania Johnson at (813) 506 2420
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**

O.E.CREATIONZ LLC

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

The Articles of Organization for this Limited Liability Company were filed on 9/5/2023 and assigned Florida document number L23000419677.

This amendment is submitted to amend the following:

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

O.E.CREATIONZ LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

4387 PARAGLIDER PLACE

WESLEY CHAPEL, FL 33545

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4387 PARAGLIDER PLACE

WESLEY CHAPEL FL 33545

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:

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.

BY



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>
AMBR/ MGR	DWAYNE D. JOHNSON	4387 Paraglider Pl	<input checked="" type="checkbox"/> Add
		wesley chapel, FL 33545	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Taina N. Johnson	4387 paraglider Place	<input checked="" type="checkbox"/> Add
		wesley chapel, FL 33545	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 9/26/ 2023

Dwayne Johnson
Typed or printed name of signer