L23000427570

(Req	uestor's Name)	
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PICK-UP	TIAW	MAIL
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Certified Copies	Certificates o	f Status
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Special Instructions to Fi	iling Officer:	
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09/27/23--81813--011 **25.00

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	rporations				
		RIE KRAUSE, LLC	•			
SUBJECT:	-	Name of Limited Liability Company				
The enclosed	d Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please return	ı all correspo	ondence concerning this matte	r to the following:			
		ROSE MARIE KRAUSE				
			Name of Person	-	•	
			Firm/Company			
3450 GULF SHORE BLVD N #207						
		- -	Address		2023 SEC	
		NAPLES, FL 34103	<u></u>		2023 SEP SECRETALLA	21,000
		ROSIE3144@HOTMAIL.	City/State and Zip Code COM		27 (E)Y	,
			(to be used for future annual report notific	cation)	E T	2071. 1 1402
For further ii	ntormation c	concerning this matter, please (call:		F. 18.	
ROSE MAR			239 207-9892 at ()		<u></u>	
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a	a check for th	he following amount:				
■ \$25.00 F	Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
Re _y Div		Section Corporations	Street Address: Registration Sect Division of Corp	orations		
P.C	D. Box 632	27	The Centre of Ta	llahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as (A Florida Limited Liabil	s it now appears on our inty Company)	records.)	_
The Articles of Organization for this Limited 1 Florida document number L23000427570	Liability Company wer	e filed on 09/13/2023	and	assigned
This amendment is submitted to amend the for	llowing:			
A. If amending name, enter the new name	of the limited liability	company here:		
ROSE MARIE KRAUSE, LLC				
The new name must be distinguishable and contain the	words "Limited Liability C	ompany," the designation	"LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if apple	icable:			
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		2EC 23EC	<u></u>
	_		CHETAS	O TTO
Enter new mailing address, if applicable:	_			
(Mailing address MAY BE A POST OFFICE	<u> </u>		2-4 236 2-4 5-4	
B. If amending the registered agent and/or agent and/or the new registered office addr		ess on our records, g	enter the name of the i	new registered
Name of New Registered Agent:	ROSE MARIE KRA	AUSE		
New Registered Office Address:	3450 GULF SHORE	E BLVD N #207		
		Enter Florida street	address	
	NAPLES		, Florida ³⁴¹⁰³	
		City	Zip Cod	de -

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

ROSE MARIE KROUSE, LLC

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>	Type of Action
AMBR	ROSE MARIE KRAUSE	3450 GULF SHORE BLVD N #207	\BAdd
		NAPLES, FL 34103	□Remove
			Change
AMBR	ROSE MARIE KROUSE	3450 GULF SHORE BLVD N #207	
		NAPLES, FL 34103	Remove
			🗀 🗀 Add
			Remove 7 2023 SEP 27 Change
			Add 1
			□Change
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Effective date, if other than the defeat effective date is listed, the date must be Note: If the date inserted in this blockblocument's effective date on the Dep	be specific and cannot be pook to does not meet the app	olicable statutory fi	(option of the contract of the	tiling.) Pursuant to	605.0207 listed as
record specifies a delayed effective of is filed.	date, but not an effectiv	e time, at 12:01 a.i	n. on the carlier of: (b	The 90th day	after the
SEPTEMBER 13	. 2023				
	/ /	1 /			
Dated	Ul Manignature of a member or a	ul Kra	ive of a member	_ .	_

Filing Fee: \$25.00