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SION OF CORPORATIONS

Y. SCOTT OCT 2 2 2023

## **COVER LETTER**

TO:	Registration Sec Division of Corp			o		
SUBJI	ECT: GOOC!		1 CF LLC ited Liability Company	·		
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspor	ndence concerning this matter	to the following:			
		Sheena	Name of Person			
		Good Deal	5 Divect L.L.		SECRE ) V 5 6% ( 2023 OCT	فتصريفة بأد
		2800 10th	SF SW Address		FILE OF COI	
			City/State and Zip Code  Outhoo Com  to be used for future annual report noti		OF STATE RPORATIONS PM 3: 34	
For fur	ther information co	ncerning this matter, please c				
Sh	eena Her Name of		at ( <u>129</u> ) <u>SUS –</u> Area Code Daytim	C1707. ne Telephone Number	_	
Enclos	ed is a check for the	e following amount:				
<b>\$</b>	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	Status &	
	Mailing Address	<u>:</u>	Street Address:			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Good Deals	Direct LL	<u> </u>	<del></del>
(Name of the Limited	Liability Company as it now as Florida Limited Liability Compa	ppears on our records.) any)	
The Articles of Organization for this Limited Liab Florida document number <u>L 23000 441</u>	oility Company were filed or	n 9/27/2023	and assigned
This amendment is submitted to amend the follow	/ing:		
A. If amending name, enter the new name of the Good Deals Direct L		<u>ny here</u> :	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company,"	the designation "LLC" or the ab	previation "L.L.C."
Enter new principal offices address, if applical (Principal office address MUST BE A STREET)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)  B. If amending the registered agent and/or regagent and/or the new registered office address	OX) gistered office address on o		SEGRETARY OF STATE OF STATE OF CORPORATIONS 2023 OCT 12 PM 3: 34
Name of New Registered Agent:  New Registered Office Address:	Sheena He 2800 loth St	VVEVU SW er Florida street address	
	Lenian Hores	, Florida	3397 (J 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
MGR	Sheena Herrera	7800 101n St Sw Lehign Acres	11 3397U
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ective date, if other than the date of filing: a effective date is listed, the date must be specific and ca	not be prior to	date of filing or n		otional) Ber filing.) Pursuar	nt to 605.020
te: If the date inserted in this block does not mee	the applicabl	le statutory filir	g requirements, t	this date will not	t be listed a
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	m	. 13.01	a re-c	(1) 77 003	
ecord specifies a delayed effective date, but not an is filed.	effective time	e, at 12:01 a.m.	on the eartier of:	(b) The 90th o	ay after the
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