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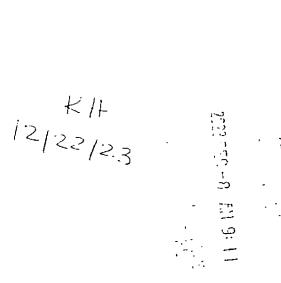
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COVER LETTER

	Registration Sec Division of Corp		•	*
CUD IN		TAX & MULTI SERVICES	L.L.C.	
SUBJEC	.1:	Name of Lin	nited Liability Company	
		amendment and fee(s) are sub	-	
		JHONNY MERGENA		
		_	Name of Person	
Firm/Company 5112 14th STREET WEST UNIT A Address BRADENTON FL 34207 City/State and Zip Code				
		5112 14th STREET WEST	T UNIT A	
			Address	
		BRADENTON FL 34207		
			City/State and Zip Code	
			RVICESLLC@GMAIL.COM	
		E-mail address: ((to be used for future annual report notific	ation)
For furth	er information co	ncerning this matter, please c	all:	
JHONNY	Y MERGENA		415 416-8606 at ()	
	Name of	Person		Felephone Number
Enclosed	is a check for the	: following amount:		ා පා වා
■ \$25. 0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	i	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

SUPREME TAX & MULTI SERVI	CES L.L.C.	
(Name of the Limite	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Li	ability Company were filed on 10/23/2023	and assigned
Florida document number 1.23000484134	·	
This amendment is submitted to amend the follo	is submitted to amend the following: name, enter the new name of the limited liability company here: be distinguishable and contain the words "Limited Liability Company," the designation "LEC" or the abbreviation "L.L.C." ipal offices address, if applicable:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE I	<u></u>	
		2023
		つ 门
	egistered office address on our records, <u>enter the n</u>	ame of the new registered
agent and/or the new registered office addres	s nere:	Ö
Name of New Registered Agent:		3
New Registered Office Address:	Enter Florida street address	rr:
	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
MGR	ROBIN, JEAN JOSEPH	12224 HIGH ROCK WAY	□ Add
		PARRISH, FL 34219	_
			□Change
		4. · · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
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Effective date, if other than the date of an effective date is listed, the date must be example. If the date inserted in this block document's effective date on the Department.	specific and cannot be prior to does not meet the applica	o date of filing or more than able statutory filing requi	i 90 davs after filing.) Pur	suant to 605,0207 not be listed as
e record specifies a delayed effective da d is filed.	te, but not an effective tii	ne, at 12:01 a.m. on the	earlier of: (b) The 900	h day after the
DECEMBER 5TH	2023	•		
Vie				

Filing Fee: \$25.00

Typed or printed name of signee