## L23000486093

(Re	equestor's Name)	
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Office Use Only



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## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Sec Division of Corp			
SUBJECT:	Wo Maket	anste	
SUBJECT:	Name of Limit	ted Liability Company	<del></del>
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	ndence concerning this matter t	o the following:	
	Ant	Onto MOSS Name of Person	Y
	We	Mate haste Firm/Company	
	4507	689+ W Aft	B
	Brade or	on Fl 342 City/State and Zip Code	10
	E-mail address: (t	nate has telled and report notification	inail com
For further information co	oncerning this matter, please ca	alt:	
AMON O Name of	moSS f Person	at (441) 348 Area Code Daytime Te	H710
Enclosed is a check for the	ne following amount:		
S25.00 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 Addres Registration S		Street Address: Registration Section	on
Division of C P.O. Box 632	Corporations	Division of Corpo The Centre of Tall	rations
F.O. DOX 032	. 1	the Centre of Tan	TO THE STATE OF TH

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WE MAKE HASTE LLC	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L23000486093	were filed on 10/25/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4507 68TH STREET W., APT. B
(Principal office address MUST BE A STREET ADDRESS)	BRADENTON, FL 34210
Enter new mailing address, if applicable:	SAME
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
·	, Florida

## 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	Dion Flemming	6805 Buthan	□Add
	J	drive union city	CRemove
		<u> 9a</u> 30291	Change
ANBR	Dion Flerming	6805 Burkbend dril	∕(_ □Add
		6805 Burkbend drill	Remove
			Change
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	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
	<del></del>
lfan effecti <u>Note:</u> If t	date, if other than the date of filing:
e record sp rd is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	9ctober 24th. 2023.
	Signature of a member or authorized representative of a member
	$\wedge$