L23000506342

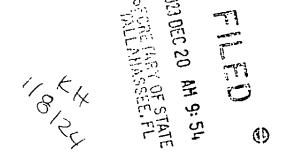
(Requestor's Name)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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COVER LETTER

Division of Co		F.			
SUBJECT: ARIELLE	LLLC				
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	ARIELLE L. DISCIASCI	0			
		Name of Person			
	ARIELLE L LLC	Firm/Company			
	3003 SW 141ST AVENU				
		Address			
	MIRAMAR, FLORIDA 3				
	arielledisciascio@gmail.co	City/State and Zip Code			
	- -	to be used for future annual report not	ification)	دے	
For further information e	concerning this matter, please co	all:		DAS DE	
Arielle L. Disciascio		at (954) 483-4357		C 20	and the same of th
Name o	f Person	Area Code Daytim	ne Telephone Number	2023 DEC 20 AM 9: 5 SECRETARY OF ST	Ö
Enclosed is a check for the	he following amount:			型 54	Ø)
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	ng Fee, of Status &	

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

ARIELLE L'LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 11/07/2023	and assigned
Florida document number L23000506342		
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 Liabil	ity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
		201 St
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the n	ame of the frew registered
agent and/of the new registered office address nere.		C 20
Name of New Registered Agent:		
Name of New Registered Agent.		100 9
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Florida	Zip Code

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

. D. C. J. C. J. L. C.

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 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	ARIELLE L. DISCIASCIO	. DISCIASCIO 3003 SW 141ST AVENUE	
		MIRAMAR, FL 33027	□Remove
			■ Change
			□Remove
		 	_ □Change
			□Add
			Remove SECRITOR TO 20
			20 AM 9: Refu
			Change
			□Add
			□Remove
			☐ Change
			□ Add
			Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) This is an amendment to correct the last name of the MGR, Arielle L. Disciascio, whose complete last name did not print correctly at the time of filing. It only appears as "Di" in the original filing. E. Effective date, if other than the date of filing: 12/12/2023 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Puramant to 605,0207 (3)(b) 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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated December 12

December 12 , 2023

Classical Signature of a member or authorized representative of a member

Arielle L. Disciascio, MGR

Typed or printed name of signee