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۰. To: Division of Corporations Fax Number : (850)617-6383 **.**... From: Account Name : REGISTERED AGENTS INC. Account Number : I2009000081 Phone : (307)200-2803 <u>...</u> Fax Number : (813)436-5206 \*\*Entersthe email address for this business entity to be used for future  $\Leftrightarrow$ "annual report mailings. Enter only one email address please.\*\* 7006 Ć \_: 2Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ITSST HOLDING LLC**

Certificate of Status	0
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024 12.44:56 PST 🗳	, To: 18506176383	Page: 2/4	From: Registered Agents Inc	Fax: 8134365
	ARTICLES	S OF AMENDMEN	T ,	, .
		TO		
	ARTICLES	OF ORGANIZAT	ION - A and	
		OF	11 U	
ITSST Ho	plding LLC		From: Registered Agents Inc ION on our records.)	
	( <u>Name of the Limited Liability</u> (A Florida	Company as it now appears Limited Liability Company)	on our records.)	,
The Articles of Organiz Florida document num	zation for this Limited Liability Co ber <u>L23000535025</u>	ompany were filed on 11/2	9/23 and a	ssigned
This amendment is sub	mitted to amend the following:			
A. If amending name	e, <u>enter the new name of</u> the limit	ed liability company her	<u>e</u> :	
The new name must be dist	inguishable and contain the words "Limit	ed Liability Company," the des	ignation "LLC" or the abbreviation "	L.L.C."
Enter new principal o	offices address, if applicable:			
(Principal office addre	ess MUST BE A STREET ADDR.	<u></u>		
				<u>.</u>
	denous d'annettendelse			
Enter new mailing ad	• -			
	dress, if applicable: <u>' BE A POST OFFICE BOX)</u>		· · · · · · · · · · · · · · · · · · ·	
	• -			
(Mailing address MAY B. If amending the re	• -	office address on our rec	ords, <u>enter the name of the n</u>	ew registered
(Mailing address MAY B. If amending the re agent and/or the new	<u>YBE A POST OFFICE BOX</u> egistered agent and/or registered registered office address here:	office address on our rec	ords, <u>enter the name of the n</u>	ew registered
(Mailing address MAY B. If amending the re agent and/or the new	<u>Y BE A POST OFFICE BOX)</u> Egistered agent and/or registered	office address on our rec	cords, <u>enter the name of the n</u>	ew registered
(Mailing address MAY B. If amending the re agent and/or the new <u>Name of New</u>	<u>YBE A POST OFFICE BOX</u> egistered agent and/or registered registered office address here:		cords, <u>enter the name of the n</u>	ew registered
(Mailing address MAY B. If amending the re agent and/or the new <u>Name of New</u>	<u>BE A POST OFFICE BOX</u> egistered agent and/or registered registered office address here:			ew registered

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 dutics, 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. Thereby confirm that the limited liability company has been notified in writing of this change.

MGR = _ N AMBR = _	Manager Authorized Member		
<u>Fitle</u>	Name	Address	Type of Action
AMBR	Hunsucker, Wendell	1500 Kinglet Drive	🗹 Add
		Punta Gorda, Florida 33950	©Remove
			🗆 Change
AMBR	Hunsucker, Karen	1500 Kinglet Drive	Z Add
		Punta Gorda, Florida 33950	🗆 Remove
			🕮 Change
			Add
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			Change ,
			Ēlādā.
			🗆 Remove
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			[]Add
			🗔 Change

Page 3/4

From: Registered Agents Inc.

Fax: 8134365

1/31/2024 12:44:56 PST - . To: 18506176383

Page: 4/4

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 January 31	2024	
	Robber Journey	
	Signature of a member or authorized representative of a member	
Robin Jones		

Typed or printed name of signee