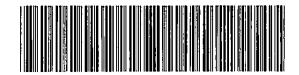
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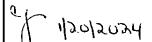
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT:	C377 HOLDING LE	- د	
	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	MICHAEL C.	arbune	
		Name of Person	
		Firm/Company	
	JUOY S NAM	ANA RIVER ISLUD C	<u> 508</u>
	COWA BEACH	Address F1 11931	
		City/State and Zip Code	
	CAPE, 1+0CVI	VGS Q YAHOOLEOM	
		to be used for future annual report notifi-	cation)
For further information	concerning this matter, please c	all:	
MICHAEL	 	at (121) 4 12 - Area Code Daytime	4059
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 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 Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations ilahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 . . . - 3 F.: 12: 4:0

CC377 HULPING LL	C		- (12.1;
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	i <mark>ny ay it now appo</mark> Liability Company	ears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000547382</u> .	were filed on _	12/11/23	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 Liabil	lity Company," the	designation "LLC" or the ab	breviation "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)			
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 nam	e of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Fl	orida street address	
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance o provided for in	of my duties, and I am for Chapter 605, F.S. Or,	amiliar with and if this document is

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>	Name	Address	Type of Action
MGR	TISAN GEMINI HULPING LLC	1309 COFFEEN AVE STE 1200	_ □Add
		SHEMIDAN, WY GREDI US	_ XRemove
			_ 🗆 Change
MGR	MICHAEL (CANDONE	3609 S. BANANA RIVER ISEVID	_ l X İAdd
		(508	_ 🗆 Remove
		COLUA BEACH, FL 2931	_ □Change
			_ 🗆 Add
		·	_ □Remove
			_ □Change
			_ □Add
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n effec <u>ite:</u> I	re date, if other than the date of filing: (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a nt's effective date on the Department of State's records.
ecord is file	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 d.
ted _	DECEMBER 27 ZUZZ
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	MICHAEL MADUNE

Filing Fee: \$25.00