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Office Use Only



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COVER LETTER

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CHRIDOT	-	GITAL LLC		
SUBJECT:		Name of Lim	ited Liability Company	-
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Andrew Pierce		
			Name of Person	
		CINDY'S FLORIDA LLO	;	
			Firm/Company	
8051 N. Tamiami Trail STE E6				
			Address	
		Sarasota, Florida, 3424	3	
			City/State and Zip Code	
		reports@cloudpeaklaw.c		
		E-mail address: (to be used for future annual report no	otification)
For further	information c	oncerning this matter, please c	all:	
Andrew Pi	erce		307 6830983	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	a check for th	ne 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)
	ailing Addres		Street Address: Registration S	ection
	egistration S vision of C	Section orporations	Division of Co	
P.0	O. Box 632	7	The Centre of	Tallahassee
Ta	illahassee, l	FL 32314	2415 N. Mont	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on ou- liability Company)	r records.)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	24 and	assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation	on "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>
			.
			<u>.</u> -=
Enter new mailing address, if applicable:			
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(Mailing address MAY BE A POST OFFICE BOX)			F:: 12: 0
			··
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records	, enter the name of the	လ <u>new reg</u> i
Name of New Registered Agent:	······································	- · · ·	
New Registered Office Address:			
	Enter Florida street address		
	, Florida City Zip Code		
	City	Zip Co	ode
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre	ee to act in this canaci	to I further earns to a	amply wi

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>	<u>Address</u>	Type of Action
AR	DIMITRI HUYGHUES-DESPOINTES	173 LAKE MONTEREY CIRCLE	□Add
		BOYNTON BEACH, FL 33426	□ Remove
			□Add
			□ Remove
			Change
		 	□ Add
			□Remove
			□Change
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ective date, if other than the effective date is listed, the date muse: If the date inserted in this blument's effective date on the De	t be specific and cannot be poock does not meet the app	plicable statutory fili	(option more than 90 days after fi ng requirements, this c	ling.) Pursuant to 605.020
cord specifies a delayed effective filed.	e date, but not an effectiv	e time, at 12:01 a.m	on the earlier of: (b)	The 90th day after the
July 03 ed	2024			
	· · · · · · · · · · · · · · · · · · ·			
	Signature of a member or a			

Filing Fee: \$25.00