## L24000069480

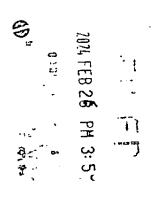
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## **COVER LETTER**

The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  LUIZ CARLOS TORRES BLANCO  Name of Person  LE BLANC HOME ELC  Firm/Company  610 SYCAMORE STREET, STE 315
Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  LUIZ CARLOS TORRES BLANCO  Name of Person  LE BLANC HOME LLC  Firm/Company  610 SYCAMORE STREET, STE 315
Please return all correspondence concerning this matter to the following:  LUIZ CARLOS TORRES BLANCO  Name of Person  LE BLANC HOME LLC  Firm/Company  610 SYCAMORE STREET, STE 315
LUIZ CARLOS TORRES BLANCO  Name of Person  LE BLANC HOME LLC  Firm/Company  610 SYCAMORE STREET, STE 315
Name of Person  LE BLANC HOME LLC  Firm/Company  610 SYCAMORE STREET, STE 315
LE BLANC HOME LLC  Firm/Company  610 SYCAMORE STREET, STE 315
LE BLANC HOME ELC Firm/Company 610 SYCAMORE STREET, STE 315
610 SYCAMORE STREET, STE 315
Address
ridates
CELEBRATION, FLORIDA 34747
City/State and Zip Code
letblanco@gmail.com
E-mail address; (to be used for future annual report notification)
For further information concerning this matter, please call:
LUIZ CARLOS TORRES BLANCO Brasil +55 11 99934-5728
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status  □ \$30.00 Filing Fee & □ \$30.00 Filing Fee & □ \$60.00 Filing Fee,  Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee,  Certified Copy (additional copy is enclosed)
Mailing Address:  Registration Section  Street Address:  Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 02/07/2024	and assigned
Florida document number 1.24000069480	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	<i>\text{\ti}\text{\texi{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\texi}\tint{\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\ti}\tint{\text{\text{\texi}\tinz{\text{\texi}\tint{\text{\texi}\titt{\text{\texi}\til\tittt{\texitile}\tint{\tiint{\text{\tii}\tint{\tii}\tiint{\tint}\tint{\tiint{\tint{\tii}\tiint{\tii}\</i>
LE BLANC HOME LLC	20 °.
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or	
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	<del></del>
	9 - w
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the	name of the new registered
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
, Floric	
City	Zip Code

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Remove
			□Change
•			□Add
			□Remove
			□Change
			🗆 🗅 Add
			□Remove
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fective date, if other than the effective date is listed, the date in other. If the date inserted in this eliment's effective date on the	block does not meet the appli	r to date of filing or more than 90 days cuble statutory filing requirements s.	optional) after filing.) Pursuant to 605,02t , this date will not be listed a
ecord specifies a delayed effect is filed.	tive date, but not an effective t	ime, at 12:01 a.m. on the earlier o	f: (b) The 90th day after the
28th February	2024	·	
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	Luiz Carlos Torres Blanco	02/28/24	

Filing Fee: \$25.00