124000070947

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

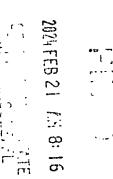




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3/5/24/ KH



COVER LETTER

TO: Registration Se Division of Cor				ì
SUBJECT: <u>Exc</u>	ephonally Clear	7 Applicances, LL ited Liability Company	<u>C</u>	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	<u> Kanusha</u> Le	PNZ Name of Person		
		Name of Person		
		Firm/Company		
	10994 SN R	Obhia Way		
	Port St	Lucie, Fl 34987 City/State and Zip Code		
		Mul (CM to be used for future annual report noti		
For further information c	oncerning this matter, please ca	all:		
Kanusha	Lenz	ar <u>(</u> 77 2 <u>)</u> 475-	0302 :	17.7
Name o	of Person	at (<u>772</u>) <u>475-</u> Area Code Daytim	a Telephone Number	78 21
Enclosed is a check for the	he following amount:		i	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Sta Certified Copy (additional copy is en	साइक्ष क

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

(Name of the Limited (A	Liability Company as it now appears (Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liab Florida document number	oility Company were filed on	02/08/2024	and assign	ed
This amendment is submitted to amend the follow	ing:			
A. If amending name, <u>enter the new name of th</u>	ne limited liabil <u>ity company her</u> e	<u>ē</u> :		
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the des	ignation "LLC" or the abl	breviation "L.L.C.	
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET)	ADDRESS)			
			-	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u></u>	_	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address because of New Registered Agent:		ords, <u>enter the nam</u>	e of the new ro	egisterec
New Registered Office Address:				, 1 Literal
New registered Affice Address.	Enter Florida	a street address	. 2	
	City	Florida	Zip Code	
<u>New Registered Agent's Signature, if changing Reg</u>	sistered Agent;		<u> </u>	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper a accept the obligations of my position as registe being filed to merely reflect a change in the reg company has been notified in writing of this ch	and complete performance of m red agent as provided for in Ch gistered office address. I hereby	ny duties, and I am fo capter 605, F.S. Or.	ree to comply amiliar with a if this docume	nd

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>	Address	Type of Action
AMBR	Kanusha Lenz	10994 SW Robbia Way, Port Saint lucie, Fl 34987	= Add
		 	□Remove
			Change
			🗆 Add
			□Remove
			□Change
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				E. B
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ffective date, if other than the dan effective date is listed, the date must be ote: If the date inserted in this block occument's effective date on the Dep	e specific and cannot be p k does not meet the ap	plicable statutory fi	(optionar more than 90 days after fili ling requirements, this da	ing.) Pursuant to 605.020
record specifies a delayed effective is filed.	date, but not an effectiv	re time, at 12:01 a.n	n. on the earlier of: (b)	The 90th day after the
February, 15 ated	2024			
Thu-	gnature of a member or a	_		
		utherized representati	var atta manha	