L240000 78987

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COVER LETTER

TO: Registration Section Division of Corpora		
SUBJECT: MAY	che Lakay. LLC	
	Name of Limited Liability Company	
The enclosed Articles of Ame	endment and fee(s) are submitted for filing.	
Please return all corresponden	nce concerning this matter to the following:	
_	Marie Roseline Choune Name of Person	
-	Firm/Company	
-	8500 Argyle Business Loop 1205 Address	
_	Jacksonville FL 32244	r
<u>)</u>	City/State and Zip Code City/State and Zip Code Choune Marie roselind@ gmail. Com E-mail address: (to be used for future annual report notification)	
For further information concer		
Veu del Paul Name of Pers	at (954) 995 - 884 2 F	င်: သ
Enclosed is a check for the fol	Howing amount:	
☑ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing □ Certificate of Status Certified Copy Certificate of Certified Copy (additional copy is enclosed)	Status &
Mailing Address: Registration Secti	5	
Division of Corpo P.O. Box 6327	orations Division of Corporations The Centre of Tallahassee	

Tallahassee, FL 32314

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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marche OI	F
Marche Marche La Kay.	LLC v as it now appears on our records)
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L240000 7898</u> 7	were filed on Feb 13, 2024 and assigned
This amendment is submitted to amend the following:	-
A. If amending name, enter the new name of the limited liabil	•
MaChe Lakay: LLC The new name must be distinguishable and contain the words "Limited Liability".	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	R Blanding Blvd 15te 10A Orange Park, FL 32073
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u> B. If amending the registered agent and/or registered office ac	8 Blanding Blvd St 10A orange Park FL 32073
agent and/or the new registered office address here:	
Name of New Registered Agent: Marie	roseline Choune
New Registered Office Address: 3500 Ar	gyle business Loop 1205 Enter Florida street address
	City Florida 32244 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 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
CEO	Marie Roseline Choune	8500 argyle business Loop Jacksonville FL, 32244	1205 BAdd
			□Remove
			□Change
Mgv	ULrick Jean Pierr	e 8500 Argyle husiness loop 1= Jacksonville, FL 32244	0.5 PAdd
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ctive date, if other than the date of filing:effective date is listed, the date must be specific and cannot be p	rior to date of filing or	more than 90 days after filing.	
e: If the date inserted in this block does not meet the apument's effective date on the Department of State's reco	olicable statutory fil		
ament's effective date of the Department of State's rece	· us.		
cord specifies a delayed effective date, but not an effecti-	e time, at 12:01 a.m	i. on the earlier of: (b) Th	e 90th day after the
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