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2024 NPR IT PH 4: 06 SECTION SEEL FL

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: The	Elegant game of Limited	Stay Liability Company	
The enclosed Articles of A	Amendment and fee(s) are submit	ted for filing.	
Please return all correspon	ndence concerning this matter to t	the following:	
	Angela	Name of Person	
	The Elega	ent Stay L	LC_
	401 Plaza	a Drive #	505
	Eustis, I	-1. 3anac City/State and Zip Code)
	letedrash	air. Com oe used for future annual report notifi	cation)
For further information co	oncerning this matter, please call:		
Angela Name of	Truit+	at (<u>381)</u> <u>438</u> — Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 5 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

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

(A Florida Limited I	Jiability Company)
The Articles of Organization for this Limited Liability Company Florida document number 2900094500	were filed on OO-OO-OOU 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 abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Angela Truitt 2725 Grand Central Ave Tavares, Florida 32778
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	407 Plaza Drive # 505 Eustis, Florida 32726
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 name of the new registered
Name of New Registered Agent: New Registered Office Address: Eusti:	Plaza Drive #505 Enter Florida street address S 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.

tr 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>		Type of Action
AMBR	Angela Truitt	2725 Grand Contral A	N. Lixaa
	J	2725 Grand Central A Tavares, F1. 32778	_ 🗆 Remove
			_ 🗆 Change
<u>PMBR</u>	Ongela Truitt	407 Plaza Dr. #50 Eustis, Fl. 30726	5 Add
		Eustis, Fl. 30726	_ 🗆 Remove
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Note: If the date	if other than the is listed, the date must te inserted in this blocative date on the De	ock does not meet the	he applicable statu	filing or more than story filing requir	(optiona 90 days after fili ements, this da	ng.) Pursuant	t to 605.020 be listed as
record specified is filed.	es a delayed effective	edate, but not an ef	Fective time, at 12	1:01 a.m. on the e	artier of: (b)	The 90th da	iy after the
Dated 🗀 -	24-20	46				er.	z
Dated C	\ \ \ \ \ \	<u> </u>	<u> </u>			NEG.	յշկ հ
	<u>ingell</u>	Signature of a member	er or authorized ren	resentative of a mer	nber		2024 APR
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Filing Fee: \$25.00