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Office Use Only



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6/15/54

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: HIMWEA	LIC.	
SUBJECT: TIMVVEHI	Name of Limited Liability Company	
The enclosed Articles of Amendmen	and fee(s) are submitted for filing.	
Please return all correspondence cor	erning this matter to the following:	
	Name of Person	
	Firm/Company	
	Address	
	City/State and Zip Code	
<del></del>	E-mail address: (to be used for future annual report notification)	
For further information concerning	is matter, please call:	
M 1000 0	026 11000	
Name of Person	VIE at (954) 235 - 49 Z2  Area Code Daytime Telephone Number	
	And out Sayane Pelephone Manual	
Enclosed is a check for the followin	amount:	
	Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee.	
	ficate of Status Certified Copy Certificate of Status	ጲ
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)	ed)
Mailing Address:	Street Address:	
Registration Section	Registration Section	,
Division of Corporation	S Division of Corporations	3
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	HIMWEAR		
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability 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)  Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	( <u>Name of the Limited</u> ) (A	Liability Company as it now appears of Florida Limited Liability Company)	<u>on our records.</u> )
A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability 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)  Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	The Articles of Organization for this Limited Liabi	ility Company were filed on <u>5</u>	15 2024 and assigned
The new name must be distinguishable and contain the words "Limited Liability 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)  Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	This amendment is submitted to amend the followi	ng:	
Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	A. If amending name, enter the new name of th	e limited liability company here	<b>:</b>
Enter new mailing address, if applicable:  (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 and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:    Enter Florida street address	The new name must be distinguishable and contain the word	s "Limited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:    Mailing address MAY BE A POST OFFICE BOX	Enter new principal offices address, if applicabl	e:	
Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	Principal office address MUST BE A STREET A	ADDRESS)	
Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO	<u></u>	
New Registered Office Address:  Enter Florida street address  Florida			ords, enter the name of the new register
Enter Florida street address Florida	Name of New Registered Agent:		
Florida	New Registered Office Address:	P.,	
		Enter Florida	
·	-	City	

## 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address 4500 Charley Hud plantation	Type of Action
MGR	Chance Tean-Pierre	8500 Charles Hud plantation FL 33324 apt 505	□Add
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