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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations			
SUBJECT: DAHY	PROVISIONS	110	
50bJEC1	Name of Lin	nited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sul	hmitted for filing	
Please return all correspond	lence concerning this matter	r to the following:	
	DENISE	DERY	
		Name of Person	
	ARGY'S	LLC Firm/Company	
		Firm/Company	
	34 7TH	AVE.	
	KEY WEST	FLORIDA 33040 City/State and Zip Code	Ο
		City/State and Zip Code	
	BILLIEBOD T	O GMAIL, COM	nincation)
For further information cor	acerning this matter, please of	call:	
DENISE D	DER P	at (<u>305</u>) <u>94</u> Area Code Dayti	2-6379
Name of I	Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address:</u> Pagistration Se	ection	Street Address: Registration S	ection
Division of Co		Division of Co	

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

HATICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAHY PROVISIONS	LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our rability Company)	ecords.)	
The Articles of Organization for this Limited Liability Company w	vere filed on MASCH	1 18,2024 and as	Ssigned
Florida document number <u>L24000133771</u> .		•	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
ARGY'S LLC			-
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation	"LLC" or the abbreviation "l	TFC.,
Enter new principal offices address, if applicable:	34 774	AVE.	
(Principal office address MUST BE A STREET ADDRESS)	KEY WEST,	FLORIDA	
	33040		
		AVE. T	
Enter new mailing address, if applicable:	34 7TH	AVE. 3	
(Mailing address MAY BE A POST OFFICE BOX)	KEY WEST	FLORIOA :	<u></u>
,	33040	· · · · · · · · · · · · · · · · · · ·	TTI
			الغيبياً
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	iaress on our records, <u>e</u>	inter the name of the ne	w registered
Plame of New Registered Agent: DEW18	SE DERY		
New Registered Office Address: 34	TTH AVE. Enter Florida street o	nddrase	
uc iz			
KEY W	City	, Florida <u>3304</u> 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 amonging Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added of removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	HAYDEN D NOYES	3124 OVERSEAS HWY	□Add
		KEY WEST FLORIDA	Remove
		33040	□Change
AMBR	ANDREW J. MUMLEY	3124 OVERSEAS HWY	□Add
		KEY WEST, FWRIDA	Remove
		33040	Change
MGR	DENISED, DERY	34 7TH AVE.	□Add
		KEY WEST FLORIDA	□Remove
		33040	Change
AMBR	YENI A MENDOZA RIVAS	34 7TH AVE.	□Add
		KEY WEST FLORIDA	□Remove
		33040	X Change
 			□Add
			□Remove
			□Change
** **			□Add
			□Remove
			□Change

If ar	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Not	ctive date, if other than the date of filing:
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date	Signature of a member or authorized representative of a mymber
	DENISE DERY VEN, A. MENDOZA L. Typed or printed name of signee

CUL TO 635.04