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COVER LETTER

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:	Modustry	Suppor	t Ser	vices
	1.7	ted Liability Company		
The enclosed Articles of Ame	endment and fee(s) are subm	nitted for filing.		
Please return all corresponde	nce concerning this matter t	o the following:		
	Nanci	1 Blake Name of Person		
	Milli	Name of Person Stry First/Company	port	Surville
	,	Firm/Company		
	2736 St.	Louis Ct		
		Address		
	Porti Vich	ra Beach	Fl.	32082
	manuello	City/State and Zip Code) a、i3A ユー	i Anal
_	E-mail address: (to	be used for future annual i	eport notification	$\frac{1}{(n)}$
For further information conce			•	•
. /	,		,	i
Nancy B	19KR	at (<u>Gib</u>) Area Code	356-	4429
Name of Per	son	Area Code	Daytime Tele	phone Number
Enclosed is a check for the fo	llowing amount:			
□ \$25.00 Filing Fee	3 \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	ion	Street Ad		
Registration Sect Division of Corp			ition Section of Corpora	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Andwary Support Survices LLC

(<u>Name of the Limited Li</u>	ability Company as it now appears orida Limited Liability Company)	on our records)
The Articles of Organization for this Limited Liabili	ty Company were filed on	32124 and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :
The new name must be distinguishable and contain the words	"Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	<u> </u>	
(Principal office address MUST BE A STREET AI	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent:		ords, enter the name of the new register
New Registered Office Address:		
regioniva omico ridarego.	Enter Florid	a street address
_		, Florida
	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.

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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
M GR	Nancy Blake	2736 St. Louis Ct Ponte Vicerabeach, Fl. 3	XÍAdd }
<u>ambr</u>	Nany Blakn	2736 St. Louis Cf. Ponte Vedra Beach, FD.	□Change Add 32032 □Remove
			□Change
		·	□Remove
			□Change
			Петюче
			□Change
·····			□Add
			Remove
			□ Change
			□ Add
			Change

Dated H14 2024, 2024. Military Black Signature of a member or authorized representative of a member	D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207(3); Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated The file of the polythesis of a member of a member of a member of a member of a member.		<u> </u>
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Signature of a member or authorized representative of a member	If the record spectrecord is filed.	
Signature of a member or authorized representative of a member	Dated	4/14/2024, 2024.
		nancy Blake
	_	
Typed of printed name of signee	_	Nancy Blaka