L24000175674

(Re	equestor's Name)	
(<u>A</u> c	ddress)	
(1)	Jui (233)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	∋ #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporation	ons		
SUBJECT: JACOB H	Winek th	terprises LLC	
	Name of China	cu Daomy Company	
The enclosed Articles of Amend	ment and fee(s) are subn	nitted for filing.	
Please return all correspondence	concerning this matter to	o the following:	
	Jacob	Hulinek Name of Person	
	Jacob Hu	linek Enterprises	s uc
	4636 S L	overing Point	
	Inverses	FL 34450 Eity/State and Zip Code	
	Huinek E-mail address: (to	2024 @ amail.	LDM ation)
For further information concern			
Jacob Huliw Name of Person		at (<u>352</u>) <u>586 -</u> Area Code Daytime T	4674 Celephone Number
Enclosed is a check for the follo	wing amount:		
\$25.00 Filing Fee	530.00 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)
Mailing Address: Registration Sectio	n	<u>Street Address:</u> Registration Secti	ion
Division of Corpor P.O. Box 6327		Division of Corpo The Centre of Tal	orations
1.0.00000027		ine Centre of Tal	THE INDUSTRA

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of New Registered Agent: New Registered Office Address:	Enter Florida street address
Name of New Registered Agent:	
agent and/or the new registered office address here:	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office	e address on our records, enter the name of the new register
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited lia	bility company here:
Florida document number <u>L24000175674</u>	
The Articles of Organization for this Limited Liability Company	y were filed on 11/07/2024 and assigned

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>	Name	Address	Type of Action
MGR	Jacob Hulinek	4636 5 Covering Pt Inven	ess ⊠Add
		fc 34450	□Remove
			□Change
		*	□Add
			□Remove
			□Change
			□Add
		.	□Remove
			🗆 Change
			DAdd
		·	□Remove
			□Add
		 	□Remove
			Change
			□Add
			□Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ian eli <u>iote:</u>	ive date, if other than the date of filing:
recor Lis fi	rd 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 led.
ated	November 7th . 2024.
	Signature of a member or authorized representative of a member
	JACOB HUUNEL Typed or printed name of signee

Filing Fee: \$25.00