



Office Use Only



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COVER LETTER

.

Registration Section

TO:

Division of Cor	porations			
SURJECT: The	Collectible Name of Lim	Corner LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Marques	(11een Name of Person		
		Name of Person		
		Firm Company	1. E. J. B. J. P.	
	2454 SOU	thlawn Ln Address	 	
		Address		
	Clermont Fl	City State and Zip Code		
		•		
	the collectible co.	ner LLC @(mail. Cor to be used for future annual report not	vitication)	
		`	ancare and a	
For further information co	oncerning this matter, please ea	all;		
MUXUUES GREEN		it (407) 92	7-7094	
MUYGUES (AVECA		Area Code Daytir	ne Telephone Number	
Enclosed is a check for th	e following amount:			
½ : \$25,00 Filing Fee	□ \$30,00 Filing Fee &	□ \$55,00 Filing Fee &	□ \$60.00 Filing Fee.	
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy	
		(additional copy is enclosed)	(additional copy is enclosed)	
Mailing Address: Registration Section		Street Address: Registration Section		
Division of Co		Division of Co		
P.O. Box 632	•	The Centre of	•	
Tallahassee, F	FL 32314	2415 N. Monro	e Street, Suite 810	
		Tallahassee, Fl	L 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Oll (c1, b) (Of (Name of the Limited Liability	Oct LLC Company as it now appears on or imited Liability Company)	ir records.
(A Florida L	limited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number <u>LZ4000177146</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	2021 HAY
Enter new mailing address, if applicable:		AY-2 P
(Mailing address MAY BE A POST OFFICE BOX)		E STAIL D
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records	s, enter the name of the new registered
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		····
	Enter Florida sire	et address
	City	Florida Zıp Code
	v aj	zap come

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 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	Type of Action
AMBR	marques Green	2454 southlawn Ln	±⊀dd
		Clermont, FL, 34714	□Remove
			□ Change
AmBR	Aleckander Chreen	21708 48 Ave W, unit	C - Kada
		mountlake terrace WA, 980	<u>43</u> □Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
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			TRemove
			□Change

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l: Hective date, if of If an effective date is lis Note: If the date ms	ther than the date of sted, the date must be spe- serted in this block door e date on the Departmo	es not meet the app	dicable statutory fil	more than 90 days after the gradient of the gr	o nat) r filing.) Pursuant to 605. is date will not be liste	.0207 (ed as t
		but not an effective	e time, at 12:01 a.m	i, on the earlier of: (l	o) The 90th day after	the
document's effective e record specifies a d	delayed effective date.					
document's effective e record specifies a d id is filed.		<u>, 702'</u>	-\			
document's effective e record specifies a d id is filed.			-1			
document's effective	26	<u> </u>	thorized representati	ve of a member		

Filing Fee: \$25.00