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10/07/24--01014--011 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CHAMP ATIN DACHTOE LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
TEAN CAUDE DERALUS Name of Person
Firm/Company
504 EAST SAMPLE 20
POMPANO BEACH FL 33CLOA CHAMPRETATI STORE (C. GARCIA) (COM) CHAMPRETATI STORE (C. GARCIA) (COM) L-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (931) 608-1198 Name of Person Area Code Daytime Telephone Number
inclosed is a check for the following amount:
S25.00 Filing Fee U \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHAMP ATM A	MACHINE	= LLC	
(Name of the Limited Liability Con (A Florida Limite	ipany as it now appea ed Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L24000 / 91979</u> .	ny were filed on	<u>C4 / 33/2021</u>	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company b	ere:	
The new name must be distinguishable and contain the words "Limited Lis	ability Company." the c	designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			- [2]
		<u></u>	
			1
Enter new mailing address, if applicable:		<u>0</u>	
(Mailing address MAY BE A POST OFFICE BOX)			:
		 :	
		r	····.
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our r	records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida 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 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

Title	<u>Name</u>	Address	Type of Action
WAR	MEAN CLAUDE Devalus	200 Mia LUGANO CIR. Apt 108	
		BOYATON BEACH FL 33436	
			~
MGL	Jan Claude Deralus		_ □Add
		509 East Sample RD	_ ZiRemove
		Pumpano BEACH FL 33064	_ 🗆 Change
			_ 🗆 Add
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	_		□Remove
	~		□Change

lf an c Note:	tive date, if other than the date of filing: QQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQQ
e reco rd is t	ord 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.
Dated	109128 (2024.
	Signature of a member or authorized representative of a member