L24000195069

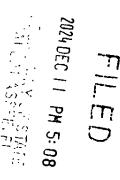
(Requestor's Name)					
(Address)					
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COVER LETTER

TO:		tration Section of Corp					
enn ie		Divine Federa	al Solutions LLC				
SUBJEC	C1: _		Name of Limi	ted Liability Company			
The encl	losed A	Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please re	eturn a	ll correspon	dence concerning this matter	to the following:			
			Nathaniel Thompson				
				Name of Person			
			Divine Federal Solutions L	ıc			
			Firm/Company				
			10705 Klee Ave				
			Address				
			Bradenton, Florida, 34212				
			City/State and Zip Code				
			nathaniel.thompson@divine	federalsolutions.com to be used for future annual report notification)			
For furth	her inf	ormation co	ncerning this matter, please or				
Nathani				703 297-6914			
Nathani	er ino			at ()			
		Name of I	Person	Area Code Daytime Telephone Number			
Enclosed	d is a o	theck for the	following amount:				
□ \$25	.00 Fil	ing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Regi	ng Address: stration Se	ection	Street Address: Registration Section			
	This si	aina of Co	momitions	Division of Cornerations			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Divine Federal Solutions LLC			
(Name of the Limited Liability ((A Florida Lii	Company as it now appears on our records.) mited Liability Company)		
The Articles of Organization for this Limited Liability Com	npany were filed on 12042023 4/25/24 and assigned		
Florida document number L24000195069			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "LLC."		
Enter new principal offices address, if applicable:	22		
• • • • • • • • • • • • • • • • • • • •	m H		
(Principal office address MUST BE A STREET ADDRES	55/		
	Sold on ITI		
Enter new mailing address, if applicable:	75 5 0		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, enter the name of the new registered		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	City Zip Code		
New Registered Agent's Signature, if changing Registered A	Agent:		
provisions of all statutes relative to the proper and com accept the obligations of my position as registered ager	nd agree to act in this capacity. I further agree to comply with the inplete performance of my duties, and I am familiar with and int as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability		

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Jaleel Thompson	442 Poets Ln, Inwood WV 25428	■Add
			□Remove
AMBR	Nathaniel Thompson		
			□Remove
		44309 Oldetowne PI, Ashburn VA 20148	Change
Manager	Randale Pete	304 Cary Drive, Beech Island SC 29842	⊟ ∧dd
			□Remove
			Change
			🗆 Remove
			□ Change
			□ Add
			Remove
			□ Change
			□ Add
			□ Remove
			Change

This amendment is to change the address of Nathan	niel Thompson and to add Jaleel Thompson as an AMBR and
Randale Pete as a Manager.	
fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot ote: If the date inserted in this block does not meet the ocument's effective date on the Department of State's re-	the prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 capplicable statutory filing requirements, this date will not be listed as the records.
record specifies a delayed effective date, but not an effe is filed.	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated 12/04/2024 ,	
Nathanise	Thompson or authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signce