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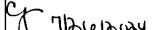




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COVER LETTER

TO:

Registration Section
Division of Corporations

WOMMIES	LLC				
овиест: <u></u>	Name of Limi	ted Liability Company			
Annual of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Decase return all correspondence concerning this matter to the following: DAYANA SANCHEZ					
Please return all correspo	ndence concerning this matter	to the following:			
	DAYANA SANCHEZ				
		Name of Person			
		Firm/Company			
	12311 SW 214TH TERR,	12311 SW 214TH TERR, MIAMI, FL 33177			
	··· ·	Address			
	MIAMI, FL 33177				
Address MIAMI, FL 33177 City/State and Zip Code rewired89@wommies.org E-mail address: (to be used for future annual report notification)					
		to be used for future annual report not	ification)		
For further information co	oncerning this matter, please ca	all:			
DAYANA SANCHEZ		(786) 754-5 at ()	5206		
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for th	e following amount:				
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &		
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, 1	Section Torporations 7	Street Address: Registration Se Division of Co The Centre of	rporations		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 3" 19 F" 5: 31 WOMMIES LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 66/12/2024 and assigned Florida document number ____L24000267240 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 12311 SW 214TH TERR, MIAMI, FL 33177 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address __, Florida ___

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	SANCHEZ, DAYANA	12311 SW 214TH TERR, MIAMI, FL 33177	≣∧dd
			□Remove
			□Change
MGR	LEAL, DAYANA	12311 SW 214TH TERR, MIAMI, FL 33177	□Add
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot block does not meet the	applicable statutor	ng or more than 90 days		
he record specifies a delayed effectord is filed.	ive date, but not an effe	ective time, at 12:0	l a.m. on the earlier o	f: (b) The 90th day aff	er the
Dated JULY 10TH	2024	4			
	A	1-1-	1		
	Signature of a member	or authorized represe	ntative of a member		
DAYANA SANCHE	Z	8			
***************************************		or printed name of si	gnee		

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