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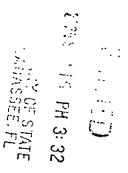
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COVER LETTER

TO: Registration Section Division of Corporations SELECT ADVCCATES SUBJECT: CELT A CATE OF AMELDMENT Name of Limited Liability Company
SUBJECT: CHUTTET (ATE OF AMEADMENT) 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:
WENDY CIVERA Name of Person
STILLERS ADVINATES (CC Firm/Company #208
8380 LACTOS DE CAMPO BLUID Address
TAMPARE ISL 33321 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (954) 501 7724 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$30.00 Filing Fee & □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

OECLEAS A (Name of the Limited Liabil	DUCATES (ity Company as it now appears on o	our records.)	
(A Florid	a Limited Liability Company)		
The Articles of Organization for this Limited Liability C	Joinpuny were med on	1/2024 and	d assigned
Florida document number 122900000000000000000000000000000000000	 ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
<u></u>			
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designa	tion "LLC" or the abbreviation	on "L.L.C."
-	, , , ,	►.	
Enter new principal offices address, if applicable:		-	•
<u>(Principal office address MUST BE A STREET ADDI</u>	RESS)		:
		77 5 780 T	
Enter new mailing address, if applicable:		ων ων ⊃: κυςν πο	[]
(Mailing address MAY BE A POST OFFICE BOX)		F. 3	
Mulling uddress MAT BE A FOST OFFICE BOX		- 77 8	
	 -		-
D. If amounting the magistered agent and a print	1 - 66 14	l	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	a omce address on our record	is, enter the name of the	e new registered
Name of New Registered Agent:			
Name of New Registered Agent.			
New Registered Office Address:			
	Enter Florida sti	reet address	
		, Florida	
	City	Zip C	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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MOR	WELDY MILLERA	8350 LAGOS DE CIAM	DODANG BLU
		SUITE 208	
		TAMPALAR, FL 33	32-DChange
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			□Remove
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n effective date is listed, the date must be specific and cannot be prior to date of to tee: If the date inserted in this block does not meet the applicable statu	filing or more than 90 day:	after filing	.) Pursua	
cument's effective date on the Department of State's records.	tory ming requirement	s, ans date	***************************************	n oc nated
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ecord specifies a delayed effective date, but not an effective time, at 12: is filed.	or a.m. on the earner	oi: (o) i i	ic 90iii	day after
ted 9/1/2024,				
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Signature of a member or authorized repri	esentative of a member			

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