

2024-10-03 08:58:52 UTC+14

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From: ZenBusiness Use

((4124000333760 3))) 10-2-24, 2:50 PM

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> > (((H24000333760 3)))



H240003337603ABC

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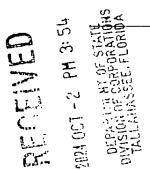
From:

Account Name : ZENBUSINESS INC.

Account Number: I20230000190 Phone : (844)449-3624

: (512)597-0678 Fax Number

er the email address for this business entity to be used in the annual report mailings. Enter only one email address please.**? **Enter the email address for this business entity to be used for feture



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(((H240<u>0033**3760**B3</u>)))

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H240003337603)))

nonprofineporteards.org LLC	
(<u>Name of the Limited Liabilia</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L24000346915	ompany were filed on 08/07/2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company hore:
Labor Boys of South Tampa LLC	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the above visit and LLC."
The first table there is singularity and contain the section of	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	(ESS)
	20 7
	± 5. ± 0.
Enter new mailing address, if applicable:	[™] 8
(Mailing address MAY BE A POST OFFICE BOX)	កា
marca surface variation variation	
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	l office address on our records, <u>enter the name of the new registered</u>
New Registered Office Address:	
THE TABLE TO STATE OF THE STATE	Emer Floridastreetuddress
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered	d Agent:
provisions of all statutes relative to the proper and concept the obligations of my position as registered of	and agree to act in this capacity. I further agree to comply with the omplete performance of my duties, and I am familiar with and gent as provided for in Chapter 605, F.S. Or, if this document is ad 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

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(((H24000333760 3)))

<u>Title</u>	Nume	Address	Type of Action
AMBR	Vincent Michael Chiappone	3010 W Stovall St. F	
		Tumpa, FL 33629	□Remove
			□Change
			□Add
			□Remove
			[]Change
			[]Add
		***************************************	Remove
			Change
			bbACl
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			CIAdd
			□Remove
			☐ Change

To:

	ual labor services to homeowners, businesses, and properly managers in the
South Tampa area,	
<u> </u>	
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record specifies a delayed offective his filed	e date, but not an effective time, at 12:01 a m. on the earlier of: (b). The 90th day after the
	2024
October 02 ated	
ated October 02 /s/ Vincent Chiappo	