## L24000388667

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## **COVER LETTER**

TO:

Tallahassee, FL 32314

	egistration S ivision of Co			
SUBJECT		Enterprises LLC		
JODJECI				
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all corresp	ondence concerning this matter	to the following:	
		William Li		
			Name of Person	·
		Heekin Law, PA		
			Firm/Company	
		135 Durbin Station Court	Suite 501	
			Address	
		St. Johns, FL 32259		
			City/State and Zip Code	· _
		william@heekinlaw.com  E-mail address: (	to be used for future annual	report polification)
For further	information c	concerning this matter, please ca		oport notification)
William Li			904 998	3-9733 x 1043
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is	a check for th	ne following amount:		
<b>■</b> \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate of Status &
	niling Addres		Street Ad	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327			tre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Howmann Enterprises LLC (Name of the Limited Liability Company as it now appears on our re (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number L24000388667 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 "L.L.C." 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
MGR	Jason Neumann	437 Richmond Park Drive E.	<b>=</b> Add
		Jacksonville, FL 32224	□Remove
			☐Change
MGR	Jason Newnann	437 Richmond Park Drive E.	□ Add
		Jacksonville, FL 32224	■Remove
			Change
			□Add
			□Remove
		<del></del>	□Change
		<del>.</del>	□Add
			Remove
			□Change
			🗀 Remove
			☐ Change
			□Add
			□Remove
			□Chango

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
·	
•	
•	
(If an ef <u>Note:</u>	ive date, if other than the date of filing:
the recordis fi	rd 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 led.
Dated	Septembr 17 . 2024.
	Signature of a member or authorized representative of a member
	William Li, Authorized-Representative  Typed or printed name of signee

Filing Fee: \$25.00