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COVER LETTER

Tallahassee, FL 32314

TO: Registration So Division of Cor			
SUBJECT: TDA	CHANOTIS.	1110	
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Chandra L	Name of Person	
		Firm/Company	
	1203 S. A	Jdelle Ave Address	2024-00 SECIN
	Deland, F	City/State and Zip Code	
	1adychan 55 E-mail address:	to be used for future annual report noting	n fication) 53
For further information c	oncerning this matter, please ca	all:	$-\frac{1}{10}$. ω
		at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C	Section orporations	Street Address: Registration Sec Division of Cor	porations
P.O. Box 632	7	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

nny as it now appears on our records.) Liability Company)
nay as it now appears on our records.) Liability Company)
were filed on $9-5-2024$ and assigned
oility company here:
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lity Company," the designation "LLC" or the abbreviation "L.L.C."
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address on our records, enter the name of the new registered
Enter Florida strest address
, Florida
City Sip 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, 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
			□Add
		<u></u>	□Remove
			
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ective date, if other than the date of filing: n effective date is listed, the date must be specific and canno	t be prior to date of filing or mor	optice than 90 days after	o nal) filing.) Pu	rsuant to	605.02
te: If the date inserted in this block does not meet the cument's effective date on the Department of State's	ne applicable statutory filing	requirements, this	date will	not be	listed
ecord specifies a delayed effective date, but not an eff is filed.	fective time, at 12:01 a.m. or	the earlier of: (b) The 90)th day a	after tl
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red September 20th, e	2024.				
Landre John &	12	f			-
Signature of a member	er or authorized representative o	i a member			