## L24000397971

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## **COVER LETTER**

	istration Sect sion of Corpo						
	AB3M LLC						
SUBJECT:		Name of Lim	ited Liability Company		<del></del>		
The enclosed	Articles of Ar	nendment and fee(s) are sub	mitted for filing.				
Please return	all correspond	lence concerning this matter	to the following:				
		Andrew Pierce					
			Name of Person				
		Cindy's Florida LLC					
			Firm/Company	. <u> </u>			
		8051 N. Tamiami Trail S	STE E6				
			Address		<del></del>		
		Sarasota, Florida, 34243	3				
		reports@cloudpeaklaw.co	City/State and Zip Code om to be used for future annual	report notification)			
For further in	formation con	cerning this matter, please ca		•			
Andrew Pier	rce		307 68	3-0983			
Name of Person		at () , Area Code	Daytime Teleph	one Number			
Enclosed is a	check for the	following amount:					
■ \$25.00 Fi	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee of Certified Copy (additional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	ing Address:	uri o	Street A				
Registration Section Division of Corporations			_	ation Section n of Corporatio	ons		
P.O. Box 6327			The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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AB3M LL	С	
AB3M LLo  (Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our record Liability Company)	ALLAHASSEETENDI
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000397971</u> .	were filed on09/12/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	151 Carswell Ave	
(Principal office address MUST BE A STREET ADDRESS)	Daytona Beach, FL 32117	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	·
·	, F10	orida Zip 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 forther 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>	<u>Address</u>	Type of Action
AR	Andrew Pierce	8051 N. Tamiami Trail STE E6	□Add
			Remove
		Sarasota, Florida, 34243	□Change
MGR	Matthew Conlan	151 Carswell Ave	<b>=</b> Add
			□Remove
		Daytona Beach, FL 32117	□Change
			□ Add
			Remove
<del>_</del>	**************************************		
			□Remove
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Filing Fee: \$25.00