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COVER LETTER

TO: Registration Division of C			
SUBJECT:	1 rash Val	let Kings LLC ited Liability Company	<u> </u>
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Steve	Name of Person	
	Trash v	Calet Kings Firm/Company	
	2484 Sen	try Palm Dr. # 202	<u></u>
	Дрорка,	F1 32703 City/State and Zip Code	
	E-mail address: (City/state and Zip Code (alet Kings @ outlook . to be used for lature annual report notific	Com
For further information	concerning this matter, please c	all:	
Steven	Cadely	at (407) 716 3 Area Code Daytime	801
Name	e of Person	Area Code Daytime	Felephone Number
Enclosed is a check for	the 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 Adda	ress:	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

rash	Valet M	any as it now appears on	our moords		
(Name of the Limited	\ Florida Limited	Liability Company)	our records.	.)	
The Articles of Organization for this Limited Liab		y were filed on <u>SCP</u>	十. 19世	2624	_ and assigned
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited lial	bility company here:			
he new name must be distinguishable and contain the wor	rds "Limited Liab	ility Company," the design	nation "LLC"	or the abbre	viation "L.L.C."
Enter new principal offices address, if applical	ble:				-22
Principal office address MUST BE A STREET	ADDRESS)				124
	_			~	70,4
					1
Enter new mailing address, if applicable:				is Se	<u></u>
Mailing address MAY BE A POST OFFICE B	av.			713	23:
Mulling duaress MAT BE A FOST OFFICE B	<u>UAJ</u>			;;	
				17-7	
3. If amending the registered agent and/or registered office address		address on our recor	ds, <u>enter t</u>	he name o	f the new registered
Name of New Registered Agent:	Charly	Vernitus			
New Registered Office Address:			-		
		Enter Florida s	treet address		
			, Flor	rida	
		City		-	Zip Co de

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

Title Name Address Type of Action

MGR Steven Cadely 9484 Senty Palm Dr. #202 Madd

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an el	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
	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 iled.
atec	
	XI
	Signature of a member or authorized representative of a member
	Steven Cadely Typed or printed name of signee