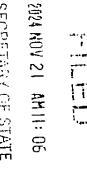
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Office Use Only



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COVER LETTER

TO: Registration Se Division of Co			
Anthony S SUBJECT:	antana LLC		
	,		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	
	Jessica Candelaria		_
		Firm/Company	
	10730 102nd Ave		
		Address	-
	Seminole, FL 33778		
	jessica.candelaria@yourab	City/State and Zip Code partners.com	_
	E-mail address:	(to be used for future annual report notification)	
For further information of	concerning this matter, please c	rall:	2024 SEC TV
Jessica Candelaria		727 828-9945 at ()	RETAIN THE
Name o	of Person	Area Code Daytime Telephone Numb	PILITION 21 AM II: 07 SECRETARY OF STAT TALLAHASSEE, FL
Enclosed is a check for the	he following amount:		M ST C
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	Filing Fee. The state of Status & Copy al copy is enclosed)
		•	

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

Street Address: 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

Anthony Santana LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on October 4, 2024	and assigned
Florida document number 1.24000429574		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
Anthony L Santana LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	(S)	
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		24 EC
		EE TO THE
		14 2 i
B. If amending the registered agent and/or registered of	Tice address on our records, enter the n	ame of the new registered
agent and/or the new registered office address here:		一 所所 王 广
		E ST III I
Name of New Registered Agent:		07 FATE
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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 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>	Name	Address	Type of Action
		 	
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			Change
			□Remove
			□ Change
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Effective	e date, if other than the date of filing:	音の
lf an effecti <u>Note:</u> If	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuame the date inserted in this block does not meet the applicable statutory filing requirements, this date will not but's effective date on the Department of State's records.	£ 605 E
e record s rd is filed	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
Dated	November 11 2024	
	Signature of a member or authorized representative of a member	_
	Anthony Santana	
	Typed or printed name of signee	_

Filing Fee: \$25.00