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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SICONT ENTERPRISES OF AMERICA INC

Account Number : 120160000041 Phone : (407)443-8973 Fax Number : (407)930-2626

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 02 HOLDINGS LLC

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Estimated Charge	\$25.00

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Help

K. SALY

MAR 19 2025

COVER LETTER

TO: Registration Division of C					
SUBJECT:	02 H	DLDINGS LLC			
	Name of Li	mited Liability Company			
The enclosed Articles o	of Amendment and fee(s) are si	ibmitted for filing.			
lease return ail corres	pendence concerning this matte	er to the following:			
		DESIREE TORRES			
		Name of Person			
	SICON	T ENTERPRISES OF AMERI	CA INC		
	Firm/Company				
	13550 VILLAGE PARK DR STE 255				
		Address			
		ORLANDO, FL 32837			
		City/State and Zip Code			
		unbiz.sicont@hotmail.com			
	E-mail address:	(to be used for future annual report no	(:lication)		
or further information	concerning this matter, please of	all:			
DESIRE	TORRES	at (407) 443-897	3		
Name	of Person		ne Telephone Number		
nclosed is a check for a	the following amount:				
S \$25.00 Filing Fee					
M 323.00 Fiting Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed		
Mailing Address Registration	Section	Street Address: Registration Se			
Division of C P.O. Box 632		Division of Co.	porations		
Tallahassee, I		The Centre of 7	fallahassee c Street, Suite 810		
·		Tallahasseo, FL	. 32303		

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

02 HOLDINGS LLC

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(Name of the Limited Liabil (A Florid	ity Company as it now appea a Limited Liability Company)	rs on our records.)	
·	was in Louis, was party)		90-
he Articles of Organization for this Limited Liability (Company were filed on	10/11/2024	and assigned
lorida document number L24000436646			and assigned
	<u> </u>		
his amendment is submitted to amend the following:			
If amending name, enter the new name of the lim	ited liability company he	ere:	
2 HOLDING			
e new name must be distinguishable and contain the words "Lim	ited Liability Company," the d	esignation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		•	
	-		
rincipal office address MUST BE A STREET ADDR	<u>(ESS)</u>		
			
iter new mailing address, if applicable:			
ailing address MAY BE A POST OFFICE BOX			
			<u> </u>
			
If amending the registered agent and/or registered ent and/or the new registered office address here:	office address on our re	ecords, <u>enter the</u> na	me of the new registe
Name of New Registered Agent:			
New Registered Office Address:			
Mew Adgistered Office Address:	Enter Flori	da streel address	
	City:	, FIOTION _	Zıp Code
y Registered Agent's Signature, if changing Registered	Agent:		
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent a wisions of all statutes relative to the proper and concept the obligations of my position as registered agenting filed to merely reflect a change in the registered ampany has been notified in writing of this change.	City: Agent: nd agree to act in this complete performance of new tasks are only the desire of the control of	"Florida _ apacity. I further as my duties, and I am	tree to compl familiar with
	If Changing Registered 4	4 Cinneture (C)	
	If Changing Registered Ager	ii, Signature of New Re	gistered Agent

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Filing Fee: \$25.00

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