Division of Corporations

(((H23000143356 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MYCOMPANYWORKS, INC.

Account Number : I20230000035

Phone : (702)362-2677

Fax Number : (702)825-2581



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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WHQ AND SONS LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

M. SOLOMON

APR 18 2023

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H230001433563

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WHQ AND SONS LLC						
(Name of the Limite	d Liability Compar (A Florida Limited I.	ny as it now appears on our rec liability Company)	ords.)			
The Articles of Organization for this Limited Li	ability Company	were filed on 01/20/2023		and as	signed	
Florida document number L23000022554	·					
This amendment is submitted to amend the folk	owing:					
A. If amending name, enter the new name of	the limited liabi	lity company here:				
			1.00		1.0"	_
The new name must be distinguishable and contain the w		7912 Pine Crossings Cir.	LLC" or the above	viation "1	.L.C.	
Enter new principal offices address, if applica	able:				~	_
(Principal office address MUST BE A STREE	T ADDRESS)	Orlando, FL 32807		1-17 	2023	_
				12-121 	<u></u>	
				200	<i>₹</i>	p~~.
Enter new mailing address, if applicable:		7912 Pine Crossings Cir.		<u> </u>	7	j,
(Mailing address MAY BE A POST OFFICE)	BOX)	Orlando, FL 32807			⊒¥	_ _
				22 2	5:	
				يات	57	
B. If amending the registered agent and/			rds, enter th	: name	of the	nev
registered agent and/or the new registered of	fice address here	:				
	n					
Name of New Registered Agent:	Ryan Goodwin					_
New Registered Office Address:	7912 Pine Cros	sings Cir.				
		Enter Florida street ad	dress			
	Orlando		Florida 3280	1		
		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 Changing Registered Agent, Signature of New Registered Agent

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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	<u>Name</u>	Address	Type of Action
MGR	Moises Figueroa	632 Brooke Court	
		Clermont, FL 34711	■ Remove
		<u> </u>	☐ Change
AMBR	Moises Figueroa	632 Brooke Court	
		Clermont, FL 34711	■ Remove
			☐ Change
MGR	Ryan Goodwin	7912 Pine Crossings Cir.	
		Orlando, FL 32807	☐ Remove
			Change 28
			D'Add APR
			Charge 57
			□ Add
			D Remove
			□ Change
			☐ Remove
			☐ Change

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If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)	
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	2023	
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.02	207
Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	le statutory filing requirements, this date will not be listed	85
·		
he record specifies a delayed effective date, but not a The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier	of
Dated April 14 2023		
Dated,	- '	
il Ce		
Signature of a member or authoriz	zed representative of a member	
Ryan Goodwin, Manager Ryan Goodwin,	name of signee	
Typed or minted	name of signee	

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