

L24 0000 36262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

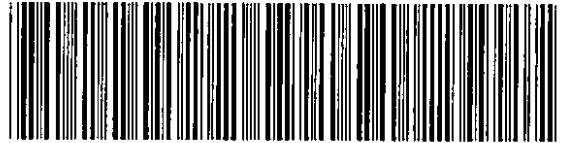
(Business Entity Name)

(Document Number)

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R. HUNT

02/06/24

Page 1 of 3

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>	<u>Type of Action</u>
AMBR	WESLEY KOUZA	452 NE 31st St #2910	☐ Add
		Miami, FL 33137	☐ Remove
			☒ Change
			☐ Add
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			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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STATE, FL

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated February 5th 2024

Wahyuna

Signature of a member or authorized representative of a member

WESLEY KOUZA

Typed or printed name of signee