

L-15000034963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

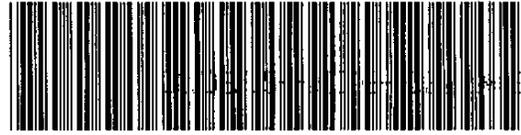
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 AUG 25 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 26 2015

T. HAMPTON

COVER LETTER

**Registration Section
Division of Corporations**

Enlightenmat LLC
SUBJECT:

Name of Limited Liability Company

Enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carissa Kranz

Name of Person

Enlightenmat LLC

Firm/Company

3801 PGA BLVD, Suite 600

Address

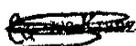
Palm Beach Gardens, FL 33410

City/State and Zip Code

ckranzlaw@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:



Carissa Kranz

Name of Person

at (305) 725-8885

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

25.00 Filing Fee

*already
mailed
on 8.6.*

\$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 ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

~~RECEIVED~~
15 AUG 25 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 13, 2015

CARISSA KRANZ
LAW OFFICES OF CARISSA KRANZ PA
3801 PGA BLVD - STE 600
PALM BEACH GARDENS, FL 33410

SUBJECT: ENLIGHTENMAT LLC
Ref. Number: L15000034963

We have received your document for ENLIGHTENMAT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III

Letter Number: 615A00017115

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Enlightenmat LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 2/23/2015

document number L15000034963

amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

If new principal offices address, if applicable:

Enlightenmat LLC/Carissa Kranz

Principal office address MUST BE A STREET ADDRESS)

3801 PGA Blvd, Suite 600

Palm Beach Gardens, FL 33410

If new mailing address, if applicable:

Enlightenmat LLC/Carissa Kranz

Mailing address MAY BE A POST OFFICE BOX)

3801 PGA Blvd, Suite 600

Palm Beach Gardens, FL 33410

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Carissa Kranz

New Registered Office Address:

3801 PGA Blvd, Suite 600

Enter Florida street address

Palm Beach Gardens

Florida 33410

City

Zip Code

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.

Handwritten signature of Carissa Kranz

If Changing Registered Agent, Signature of New Registered Agent

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ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
(removed from our records):

MG-R = Manager

BR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MG-R	Carissa Kranz	200 Ocean Trail Way, #504	<input type="checkbox"/> Add
		Jupiter, FL 33477	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MG-R	Carissa Kranz	3801 PGA BLVD, Suite 600	<input checked="" type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(amending any other information, enter change(s) here: (attach additional sheets, if necessary.)



Please refund my \$10 for overpayment of funds. Thank you!

Lined area for additional information or amendments.

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.

The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed.

Dated _____

Handwritten signature of Carissa Kranz

Signature of a member or authorized representative of a member

Carissa Kranz

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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