## L17-00007-2903

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SECRETARY OF STATE

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TO: Registration S Division of Co		•			
Phoenix B	usiness Development LLC				
JOBSECT.	Name of Lin	nited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		2022 A SECF	,
Please return all corresp	ondence concerning this matter	to the following:		US 2	
	William J Reilly			SAS E	
		Name of Person		9: 03 E.FL	
	<del></del>	Firm/Company	····		
	13867 Eastpointe Way				
		Address			
	Palm Beach Gardens FL	33418			
		City/State and Zip Code			
	wjreillyesq@gmail.com				
	E-maîl address: (	to be used for future annual report noti-	fication)		
For further information	concerning this matter, please c	all:			
William J Reilly		561 2895063 at ( )			
Name	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for t	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status &	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## TO ARTICLES OF ORGANIZATION **OF**

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PHOENIX BUSINESS DEVELOPMENT LLC		72 NUC TALL
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)	29 PH
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000072903</u> .		SS and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13867 Eastpointe Way	bility Billier
(Principal office address MUST BE A STREET ADDRESS)	Palm Beach Gardens, FL 33418	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	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.

	•	
or removed	<u>l from our</u>	records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	William J Reilly	13867 Eastpointe Way	<b>=</b> Add
		Palm Beach Gardens, FL 33418	□Remove
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			Remove
			□Change

fective date, if other than the date of filing:  (option offertive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after late: If the date inserted in this block does not meet the applicable statutory filing requirements, this cument's effective date on the Department of State's records.	
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current's effective date on the Department of State's records.	date will not be listed a
scord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) s filed.	The 90th day after the
August 23 2022	
DTy Berker	
Signature of a member or authorized representative of a member	