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COVER LETTER

Division of Co	rporations		
SUBJECT:	Barney Minkos Name of Limi	LLC	
Sobolett.	Name of Limi	ted Liability Company	 -
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspondent	ondence concerning this matter t	to the following:	
	Kelly	Stubblebine	
		Name of Person	
	Embrace	Solutions LLC	
		th Rd. N. Address	
	West Pal	m Beach FL 3: City/State and Zip Code	
	Kells1426	a Gmail. Com to be used for future annual report notifi	
	E-mail address: (t	o be used for future annual report notifi	ication)
For further information	concerning this matter, please ca	dl:	
helly S	Aubolebine of Person	at (<u>561</u>) <u>660 -</u> Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	☐ \$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)

Registration Section

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

<u>Barney Minko</u>	s LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 1800222632</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	
Embrace Solutions, The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Embrace Solutions, LLC 12609 55th Rd. N. West Palm Beach, FL 33411
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Embrace Solutions LLC 12609 55th Rd. N West Palm Beach, FL 33411
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, <u>enter the name of the ne</u> e:
	Kelly Stubblebine 609 55th Rd. N. Enter Florida street address Och Backle 5200 33411
West_	Palm Beach, Florida 33411 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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>			<u>Address</u>	Type of Action
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					☐ Change
			_		D Add
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If an effective dat Note: If the da	e, if other than the is listed, the date attended in this ective date on the	must be specific an s block does not a	id cannot be prior to meet the applica	o date of filing or me ble statutory filing	(option re than 90 days after requirements, this	nal) filing.) Pursuant to 605.020 date will not be listed a:
ne record sp The 90th o	ecifies a delar day after the r	yed effective e ecord is filed	date, but not	an effective ti	me, at 12:01 a	.m. on the earlier o
Dated <u>Av</u> g	976 Re	Make	2019			
		Signature of a	member or author	rized representative of	of a member	

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Filing Fee: \$25.00