L19000101526

(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	



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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	Denova Enterprise LLC		
001301	Name of Limited Liability Company		
The en	closed Articles of Amendment and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	Mame of Person		
	Firm/Company		
	N/A Address		
	City/State and Zip Code		
	E-mail address: (to be used for future annual report notification)		()
For furt	ner information concerning this matter, please cull:		
Avon	Page of Person at (401) 970 - 2899 Name of Person Area Code Daytime Telephone Number		
	l is a check for the following amount:	V9 72	- '
□ \$ 25.	00 Filing Fee \$\Bigcup \$30.00 Filing Fee & B55.00 Filing Fee & B60.00 Filing Fee & Certificate of Status Certified Copy Certificate of Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	of Status &	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Lim	ted Lability Came (A Florida Limited	hy as it now appears Liability Company)	on our records.)		
The Articles of Organization for this Limited I.	iability Company			and assigned	
This amondment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	illty company her	<u>, 6</u> 1		
The new name must be distinguishable and contain the v Enter new principal offices address, if applic (Principal office address MUST BE A STREE	ablei	Ity Company," the dos	rignation "LLC" or the abbi	eviation "L.L C."	
Enter now mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	.N./H			C)
B. If amending the registered agent and/or r neent and/or the new resistered office address	egistored office s sa here:	iddress on our rec	ords, <u>enter the name :</u>	of the new registered	**
Name of New Registered Agent:	Panald	- James	Nelson:	ا	
New Registered Office Address:	NIA	Enter Florida	street address		٠.
		contra turing	- · · · · · · · · · · · · · · · · · · ·	: 2	•
		City	, 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.

M mil

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
AMBR	Ronald Ima Welson	4604 E. 27h Ave Tunp., R	_ DAGO
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ctive date, if other than the dat	e of filing:	(antlewal)
effective date is listed, the date must be	specific and cannot be prior to date of tiling or more	than 90 days after filing.) Pursuant to 605
ment's effective date on the Depar	does not nieet the applicable statutory filmo r	equirements, this date will not be liste
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ord specifies a delayed effective dar	te, but not an effective time, at 12:01 a.m. on	the earlier of: (h). The 90th day often
filed.	, , , , , , , , , , , , , , , , , , , ,	ino carner or. (o) The sould they after
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1 30 14 7/1.		
July 29th	ature of a member or authorized representative of	

Filing Fee: \$25.00

State of Florida Department of State

I certify from the records of this office that DENOVA ENTERPRISE LLC is a limited liability company organized under the laws of the State of Florida, filed on April 12, 2019.

The document number of this limited liability company is L19000101526.

I further certify that said limited liability company has paid all fees due this office through December 31, 2020, that its most recent annual report was filed on March 19, 2020, and that its status is active.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Nineteenth day of March, 2020





Secretary of State

Tracking Number: 2872700387CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication