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(Re	questor's Name)		
(Ad	dress)		
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Selah Forever Investment LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Donavan Samuels Name of Person	
Selah Forever Investment LLC Firm/Company	
7901 NW 29th St.	
Margate FL 33063 City/State and Zip Code	
Calliope abinadance 2033 egasil. com /	
For further information concerning this matter, please call:	
DONOVAN Samuels Area Code Daytime Telephone Number Donovan Samuels Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Solution Sol	

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

Selah Grever I		
(<u>Name of the Limited Liab</u>) (A Flori	dity Company as it now appears on our da Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	Company were filed on May 2	3 2019 and assigned
Florida document number <u>L19000131662</u>	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company." the designation	n "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
		2
Enter new mailing address, if applicable:		70 p 11
(Mailing address MAY BE A POST OFFICE BOX)		?? Ū
		13
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street	address
		Florida
	Cuy	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

Title	<u>Name</u>	Address	Type of Action
AMBR	Dennis Jordon	7901 NW 29th St. Margala, FC 3	<u>?3×/3</u> ⊠ Add
			□ Remove
			Change
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			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Please add Mr Dennis Jordon as an authorised
agent to reflect on (sunbiz.org) thanks
E. Effective date, if other than the date of filing: (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.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a m. on the earlier of: (b) The 90th day after the record is filed.
Dated 6-20-2019
Signature of a member or authorized representative of a member
Donovan Samuels

Page 3 of 3

Filing Fee: \$25.00