120000026186

(F	Requestor's Name)	
(/	Address)	
(A	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	<u> </u>
1)	Document Number)	
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ecial Instructions t	o Filing Officer:	

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/30/2020		₩WALK IN#
ENTITY NAME ANIRAL	(HOLDINGS, LLC	
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURN	
××××	Plain Copy Certified Copy	
	Certificate of Status	
Pi	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINATION NUMBER OF CERTIFICATION		
TOTAL OWED \$25.00	ACCOUNT #: I2016000007	2
Please call Tina at the	above number for any issues or concerns. Thank you s	o mach!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Anirak Holdings, LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number $\frac{L20000026186}{L20000026186}$	ompany were filed on 01-21-2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:		The Constitution of the Co
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe	ered office address on our records, <u>e</u>	nter the name of The ne
registered agent and/or the new registered office addre	ess here:	27
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	a
	City	Zip Code

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and capt the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ring filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability mpany 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Joseph M. Garritano	7126 Spyglass Avenue	= Add
		Parkland FL 33076	[] B
			☐ Change
			□ Remove
			☐ Change
			□ Remove
			Change
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			Remove
			□ Change

		ttach additional sheets, if necessary.)	
		<u> </u>	
Effective date, if other than t (If an effective date is listed, the date is <u>Note</u> : If the date inserted in this document's effective date on the	block does not meet the applicable st	(optional) e of filing or more than 90 days after filing.) Pursuant to 605.0 statutory filing requirements, this date will not be listed)207 (. J as th
the record specifies a delay) The 90th day after the r		effective time, at 12:01 a.m. on the earlier	r of:
Dated	. 2020		
/s/Vivian S	Garritano		
Vivian S Garritano	Signature of a member or authorized i	representative of a member	
	Typed or printed nam	ne of signee	

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