

LZO 000144445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

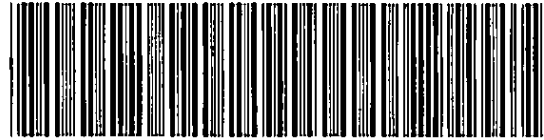
(Business Entity Name)

(Document Number)

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2020 JUN 12 PM 2:34

Amend
Katie
Ch

JUL 02 2020

ALBRITTON

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

YOUR WELLN3SS ALF "LLC"

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/27/2020 and assigned Florida document number L20000144445.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

YOUR WELLN3SS ALF LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

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Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida** _____

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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	AYLEN OLIVA		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		20950 SW 119TH CT MIAMI, FL 33177	<input checked="" type="checkbox"/> Change
AMBR	INGRID BARRERAS		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		6460 SW 129TH AVE MIAMI, FL 33183	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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