

L20 000 149947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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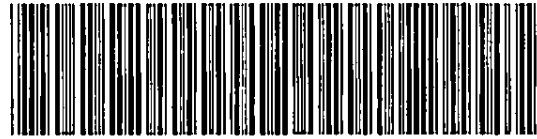
(Business Entity Name)

(Document Number)

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2020 DEC -8 PM 1:19
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JAN 23 2021

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLACK XCELLENCE RECORDS L.L.C.
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:

WICKY ST JEAN

Name of Person

Firm/Company

766 RICH DR #108

Address

DEERFIELD BEACH, FL 33441

City/State and Zip Code

blackxcellencerecord@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WICKY ST JEAN at (954) 213-3765
Name of Person 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)

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**

BLACK XCELLENCE RECORDS L.L.C.

(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 06/02/2020 and assigned
Florida document number L20000149947.

FILED
2020 DEC -8 PM 11:19

This amendment is submitted to amend the following:

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

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)

4081 N FEDERAL HWY
SUITE 210A
POMPANO BEACH, FL 33064

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1043 RIO CT
DEERFIELD BEACH, FL 33064-2052

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:

WICKY ST JEAN

New Registered Office Address:

1043 RIO CT

Enter Florida street address

DEERFIELD BEACH

Florida 33064

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 | WICKY ST JEAN | 1043 RIO CT | <input checked="" type="checkbox"/> Add |
| | | DEERFIELD BEACH, FL 33064 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | JOHANNA LAZARE | 1043 RIO CT | <input checked="" type="checkbox"/> Add |
| | | DEERFIELD BEACH, FL 33064 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | STANLEY ST JEAN | 2080 NW 1ST AVE | <input type="checkbox"/> Add |
| | | POMPANO BEACH, FL 33060 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | JIMMY ST JEAN | 2080 NW 1ST AVE | <input type="checkbox"/> Add |
| | | POMPANO BEACH, FL 33060 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | PETER MOSS | 4970 SW 7TH ST | <input type="checkbox"/> Add |
| | | MARGATE, FL 33068 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

