L21000350382

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800374700958

10/14/21--01010--028 **25.00

2021 GCT 14 PH 4: 03
SECRETARY OF STATE
TALL ARASSEE, FL

10201

COVER LETTER

TO:

Registration Section

Division of Cor	rporations				
SUBJECT:	AS IN IN	MORE LLC mited Liability Company			
	Name of Lin	niled Liability Company			
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.			
		-			
racase return an correspo	ondence concerning this matter	to the following:			
	Rud	abreu			
		Ableu Number Person ADD			
		Firm/Company			
	1500 NW	Address Address OD FL 33024 City/State and Zip Code	SECRETARY OF STATE TALLAY ASSEE, FL		
		Address	00T	-	
	HOX2 (40)0	10D FL 33024	/ 第二	7	
		City/State and Zip Code	<u>ν</u>	\square	
			1. S. H.		
	E-mail address: (to be used for future annual report notific	ration) Fig. 8		
For further information c	oncerning this matter, please c	all:			
But 1	Kien	94V 400	233/		
Name o	f Person	at (<u>954)</u> <u>544</u> Area Code Daytime	Felephone Number		
Enclosed is a check for tl	ne following amount:				
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	El \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailina Adda	e-	S4			
Mailing Address: Registration Section		<u>Street Address:</u> Registration Sect	ion		
Division of Corporations		Division of Corporations			
P.O. Box 632 Tallahassee, I		The Centre of Tal 2415 N. Monroe			
		_ : : _ : : : : : : : : : : : : : : : :			

Tallahassee, FL 32303

ARTICLES OF AMENOMENT TO ARTICLES OF ORGANIZATION OF

_ M AS IN IN X	IOKE	210	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited			
The Articles of Organization for this Limited Liability Company	were filed on	Florida	and assigned
Florida document number <u>12100035038</u>			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	ility company he	re:	
M AS IN MORE L			
he new name must be distinguishable and contain the words "Limited Liabi	hty Company," the de	signation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			202
Principal office address MUST BE A STREET ADDRESS)	<u></u>	, , , , , , , , , , , , , , , , , , , 	CR O T
			
			NSSE PH
nter new mailing address, if applicable:			
<u> Iailing address MAY BE A POST OFFICE BOX)</u>		······	- FATE - 03
			
. If amending the registered agent and/or registered office a	iddrase an aur ra	oarde antor the	n numa af tha nam nasiate
ent and/or the new registered office address here:	address on our re	coros, <u>enter tin</u>	e name of the new registe
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	la street address	-
-		, Floric	
	City		Zıp 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 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>	Name	Address	Type of Action
			□Remove
			□Change
			□Add
			□Remove
		AH) OF SIALE	. — Ablilas
		——————————————————————————————————————	∃ Change
			□Add
•			□Remove
			Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

ŀ

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. Signature of a member or authorized representative of a member