## 422000025131

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## **COVER LETTER**

TO:	Registration Section Division of Corporations	N 10	G 1 1	$\cap$	
SUBJE	CT:	NU	. 1		
		Name of Lim	ited Liability Company		
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	closed Articles of Amendment		-		
Please 1	eturn all correspondence conce	eming this matter	to the following:		
		<u>Kas</u>	simir Souffra	nt	
			Name of Person		2022 OCT 21 177 9: 28 28 28 29 20 Filing Fee, ifficate of Status & iffied Copy
		,	NO.9 LLC		
			Firm/Company		001 21 177 9: 28
		45	1 NE 136th S	+ Apt 420	
	451 NE 136th St Apt 420  Address  North Miami, FL 33161  City/State and Zip Code  Ksaffrant @ninthnumber.com		<b>7</b> 0		
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For furt	her information concerning this Kasimir S	s matter, please ca Arant	uti: L at (305 ) 930	)- <i>1031</i>	でい
	Name of Person	-	Area Code Dayti	me Telephone Number	•
Factore	d is a check for the following a	mount:			
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	Mailing Address:		Street Address:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



October 3, 2022

KASIMIR SOUFFRANT 451 NE 136TH ST APT 420 NORTH MIAMI, FL 33161

SUBJECT: NO. 9 LLC

Ref. Number: L22000025131

We have received your document for NO. 9 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE FILL OUT ALL FORMS AND RETURN ALL AS REQUIRED.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 522A00021955

Michael A Hall OPS Clerk

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

NO.92LC	; <u>1</u>	2922 OC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	- R
The Articles of Organization for this Limited Liability Company v Florida document number <u>L22000025131</u> .	vere filed on <u>:01-11-2022</u>	and assigned.
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil  9 & The Compa  The new name must be distinguishable and contain the words "Limited Liability".	ny LLC	observation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office adapted and/or the new registered office address here:	ldress on our records, enter the nam	ne of the new registered
Name of New Registered Agent:	171	<del></del>
New Registered Office Address:	Enter Florida street address	
	, Florida	_
New Registered Agent's Signature, if changing Registered Agent:	Cin	Zip Code
hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as propering filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am f ovided for in Chapter 605, F.S. Or,	familiar with and if this document is

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>	Address	Type of Action
			□ Add
			🗀 Remove
		<del> v</del>	□Change
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## Page 2 of 3

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an ett i <b>ote:</b>	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o 90th day after the record is filed.
ated	July 12th 2022
	My Commence of the Commence of
	Signature of a member or authorized representative of a member
	1/ 2 0

Page 3 of 3

Filing Fee: \$25.00