119000014811

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SECRETARY OF STATE

2021 AUG 25 PM 4: 00

103/2021

SUBJECT: Legacy On	e Management LLC	,	
<u> </u>		nited Liability Company	
		tin .	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	·
	Sultan Ramza	Name of Person	
		Name of Person	•
	·····	Firm/Company	
		1 mic company	House of the second
	1317 Edgewater Dr Ste 37	700 Address	<u> </u>
		Address	
	Orlando,Fl 32804		e voti
		City/State and Zip Code	•
	sultan@legacyonemanagen	nent.com	· .
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please c	all:	
	•	••	
Kandace Williams	CD.	at (321) 527-1086	77 1 1 2 21 23
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	na fallancina amounts		
	_	□ ### 00 F''' F #	F. 640.00 F.T. 15
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &
	Certificate of Status	(additional copy is enclosed)	Certified Copy
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Mailing Addres	_	Street Address: Registration Sec	
Registration Section			
Division of Corporations		Division of Corp	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Ta	
i alianassee, i	TL 32314		Street, Suite 810
		Tallahassee, FL	323U3

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Registration Section
Division of Corporations

TO:

ARTICLES OF ORGANIZATION FILED

2021 AUG 25 PH 4: 01

(Name of the Limited Liability Company as It now appears on aun records) SEE, FLORITY OF STATE (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/14/2019 and assigned Florida document number L19000014811 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: 37 N. Orange Ave Ste 500 (Principal office address MUST BE A STREET ADDRESS) Orlando, Fl., 32801 37 N. Orange Ave Ste 500 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Orlando,Fl 32801 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

Legacy One Management LLC

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

_	_			-
or removed	from	our	records	•

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Actio
MGR	Sultan Ramza	P.O. Box 551215, Orlando, FI 32855	🗏 Add
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). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	(*)÷
E. Ef (If:	fective date, if other than the date of filing: 08/19/2021 (optional) 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 ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument'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 1 is filed.
Σ	Oated August 19th
	Signature of a memoer of administration
	Kandace L Williams Typed or printed name of signee