L19000176110

(Re	questor's Name)	
(Ad	ldress)	-
	dress)	
(//0	uiess)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
☐ PICK-UP	L WAII	L. WAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	-
, — -	,	
Carle d Carlos	0-47.	- f Ot-1
Certified Copies	_ Centificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300417861683

19/27/23--01016--017 **25.00

COVER LETTER

TO: Registration Se Division of Cor				
	THARTES, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JODI RONEN			
		Name of Person		-
	JG CONSULTING SERV	ICES, LLC		
	<u> </u>	Firm/Company		-
	5481 WILES RD STE 502			
		Address		-
	COCONUT CREEK, FL 3	3073		
		City/State and Zip Code		-
	JODI@ACCU-TAX.TAX	to be used for future annual repo	ert notification)	
For further information c	oncerning this matter, please c		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
JODI RONEN		954 449-97 at ()		, 25
	f Person	Area Code 1	Daytime Telephone Number	. 27
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fce	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	I) Certified	ite of Status &

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

AMANZI CHARTERS, LLC	
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{07}{2}$	/08/2019 and assigned
Florida document number L19000176110	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company he	ere:
The new name must be distinguishable and contain the words "Limited Liability Company," the d	designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	20
Principal office address MUST BE A STREET ADDRESS)	
	. 1
Cutan ann mailine addeas if applicable	盟
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 ragent and/or the new registered office address here:	ecords, <u>enter the name of the new regi</u>
Name of New Registered Agent:	
New Registered Office Address: Enter Flo	rida 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 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>	Type of Action
MGRM	JOEL HOLMBERG	670 TENNIS DR #109	= Add
		FORT LAUDERDALE	□Remove
		FL 33311	· · · · · · · · · · · · · · · · · · ·
			□ Remove
			Change
			⊃ □Remove :
			Change
			🗆 Add
			Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			□ Change

<u></u>	· ·		
	<u> </u>	···	
			<u> </u>
			53
		٠	,
			· · · · · · · · · · · · · · · · · · ·
	 		· · · · · · · · · · · · · · · · · · ·
	 · · ·		
· .			
: If the date inserted in this	the date of filing: must be specific and cannot be prior s block does not meet the applicate Department of State's records.	ible statutory filing requirem	(optional) days after filing.) Pursuant to 605.0 eents, this date will not be listed
ord specifies a delayed effectiled.	ctive date, but not an effective ti	me, at 12:01 a.m. on the earl	ier of: (b) The 90th day after
d 10/15 Liki	· 2023		