LOH 0000043035

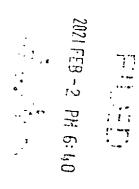
(F	Requestor's Name)	
(A	Address)	
	Address)	_
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
		;
	Office Use Only	



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MAR 1 8 2021 S. YOUNG



COVER LETTER

	Registration Se Division of Cor			
4312D 11243	SIGMAR,	LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for tiling.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		JACQUELINE O'CONNO	DR .	
			Name of Person	
		SIGMAR, LLC		
			Firm/Company	
		5835 VENETTO WAY		
		_	Address	
		VERO BEACH, FL 32967	7	
		sigmar2004@att.net	City/State and Zip Code	
		E-mail address: (to be used for future annual report notification)	
For furthe	er information c	oncerning this matter, please c	all:	
JACQUI	ELINE O'CON'S	KOR	407 353-8876	
	Name o	f Person	at () Aren Code Daytime Telephone 2	Number
Enclosed	is a check for the	ne following amount:		
■ \$2 5.0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Co (additional copy is enclosed) Co	0.00 Filing Fee, ertificate of Status & ertified Copy ddiuonal copy is enclosed)
	Mailing Addres Registration 5	Section	Street Address: Registration Section	
	Division of C	Corporations	Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIGMAR, LLC

(Name of the Limi	ted Liability Compa (A Florida Limited)	<u>ny ay it now appears</u> Liability Company)	on our records.)		
The Articles of Organization for this Limited L Florida document number L04000043035	iability Company	were filed on	SE 8, 2014	and assigne	સ ગુગુ
This amendment is submitted to amend the foll	lowing:				T T
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>v</u> :		R-2 F
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	signation "LLC" or the	abbreviation "L.L.C.	-
Enter new principal offices address, if applie	cable:	5835 VENETTO	WAY	· ±-	6: 1
If amending name, enter the new name of the limited new name must be distinguishable and contain the words "Limited I ter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS ter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address here: Name of New Registered Agent: New Registered Office Address: 5835 VEN		VERO BEACH,	FL 32967		<u></u>
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	registered office :		FL32967	me of the new re	gistered
New Registered Office Address:		Enter Floria	ki street address		
	5835 VENETI VERO BEACI	1	, Florida	32967	
		City		Zıp Code	
New Registered Agent's Signature, if changing I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	ed agent and agr oer and complete istered agent as p registered office	ee to act in this ca performance of n provided for in Cl	ny duties, and Lan hapter 605, F.S. O	i familiar with a r, if this docume	nd
	If Char	nging Registered Ager	nt, Signature of New 1	legistered 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>	Name	Address	Type of Action
AR	JOHN PATRICK O'CONNOR	2076 35th AVENUE	≣ Add
		VERO BEACH, FL32960	
			□Change
			□Add
			□ Remove
			□Change
			bbA⊡
			□ Remove
			⊡Change
			⊡Add
			□ Remove
			⊡Change
			□Remove
			Change
			bbA⊡_
			Remove
			□Change

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 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 ord is filed. JANUARY 29 JANUARY 29 JANUARY 29 ZO21 Dated Signature of a member or authorized representative of a member				,				
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Jacqueline Connor miler Signature of a member or authorized representative of a member		29	<u></u>					
Signature of a member or authorized representative of a member EACOBELINE OCONNOR MGR	Dated							
LACOBELINE OCONNOR MIGR	Dated	/ · N	POLHAL	11/11				
	Dated	queline O'	MILOS II	016K er or authorized	representative of a	member		

Filing Fee: \$25.00