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(Requestor's Name)
(Address)
(1.831833)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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COVER LETTER

TO:	Registration Se Division of Cor			
	*1 C/F	Progressive Bu	isiness Enterprise, LLC	
SUBJ	ECT:	Name of Limi	ted Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please	return all correspo	ndence concerning this matter t	o the following:	
			James V. Maduro, Jr.	
			Name of Person	
		P	rogressive Business Enterprise, I	LC
			Firm/Company	
			PO Box 3700	
			Address	*****
			Tallahassee Fl 32315	
			City/State and Zip Code	
			jvmjrbiz@gmail.com	
		E-mail address: (t	o be used for future annual report no	tification)
For fu	rther information c	oncerning this matter, please ca	ill:	
	James V	. Maduro, Jr.	850 3 at () Area Code Daytii	329-8778
	Name o	f Person	Area Code Daytii	ne Telephone Number
Enclos	sed is a check for th	ne following amount:		
□ \$2	25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

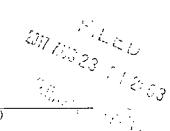
MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	sive Business Enterprise, LLC		M ₁₀₀ 200
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears orida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabilit Florida document number	y Company were filed on	June 9 2005	and assigned
This amendment is submitted to amend the following	t.		
A. If amending name, enter the new name of the l	limited liability company her	<u>re</u> :	
The new name must be distinguishable and contain the words "	Limited Liability Company," the de	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET AD	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	da street address	
	Later From		
	City	, Florida	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 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>	Name	Address	Type of Action
MGR	Marsha M David	PO 3341 Tallahassee FI 32315	
			■ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Add
			Remove
			
			Remove
			Change
			□ Remove
			Change
			☐ Remove
			□ Change

	<u> </u>
	: 1 : 5
	- 19
	
ive date, if other than the date of filing:	(optional)
ive date, if other than the date of filing: [rective date is listed, the date must be specific and cannot be prior to date of lifthe date inserted in this block does not meet the applicable stature.]	filing or more than 90 days after filing.) Pursuant to 605.02
nent's effective date on the Department of State's records.	any ming requirements, this date will like be fished to
cord specifies a delayed effective date, but not an effort some some some some conditions and the conditions are some some some some some some some som	ective time, at 12:01 a.m. on the earlier
August 2017	
Signature of a member or authorized report	

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Typed or printed name of signee

Filing Fee: \$25.00