Division of Corporations Electronic Filing Cover Sheet

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AECEIVED	2021 JUN 15 PM	From:	Division of Corporations Fax Number : (850)617-6383  Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591	TALLAHASSEE, FLORIDA	رن تع:	FILED
			the email address for this business entity to be used for future ual report mailings. Enter only one email address please.**	•		
		Ema	il Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1130, LLC

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Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1130, LLC		_
(Name of the Limited Liability Compa (A Fiorida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L07000043352	were filed on <u>04/23/2007</u> and	d assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		2021
Enter new mailing address, if applicable:		PILE LLANASSEE
(Mailing address MAY BE A POST OFFICE BOX)		FIS SI
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the	e new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City Zip (	lode .

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

Title	Name	Address	Type of Action
AMBR	BRITTANY ANN DUX	6500 Cowpen Rd Suite 301 Miami Lakes Fl 33014	<b>=</b> Add
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E. Effective date, if other than	the date of filing:	(optional)
Note: If the date inserted in thi	must be specific and cannot be prior to date of filing of a block does not meet the applicable statutory file Department of State's records.	r more than 90 days after filing.) Pursuant to 605.0207 (3)(b) lling requirements, this date will not be listed as the
If the record specifies a delayed efferecord is filed,	ctive date, but not an effective time, at 12:01 a.r	m. on the earlier of: (b) The 90th day after the
Dated June 15	2021	
Soul K		
	Signature of a member or authorized representati	ive of a member

Filing Fee: \$25.00

Typed or printed name of signee