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(Decupated Name)	
(Requestor's Name)	
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(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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SEP 02 2020 S. YOUNG

## COVER LETTER

TO: Registration Section : Division of Corporations
SUBJECT: Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Paula Ville Consum Name of Person
Tyche and Company UC
7600 COLLINS AUE APT 717
MIAMI BEACH FL 3314) City/State and Zip Code
VIII egas a Pava Comail. Com E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
PAJA VILLESAS at 305 9622  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  T_\$2\$.00 Filing Fee
Mailing Address:  Registration Section  Street Address:  Registration Section

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

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	•	<i>ب</i>
America	10	T T
(Name of the Limited Liability Compar (A Florida Limited I.	ny as it now appears on our records.) iability Company)	20 N
	1.1	802 - 177
The Articles of Organization for this Limited Liability Company	were filed on <u>8 11 7</u>	yand and gned
Florida document number <u>LOGOQX</u> 7	6701	Program of the control of the contro
This amendment is submitted to amend the following:		BOT L
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the new name must be distingui	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	<u> </u>	
	Enter Florida street address	
	Florid	da
	City	Zıp 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
			∏Add
			□Remove
			□Change
			🗆 Add
			□Remove
			IChange
			_ JAdd
			TRemove
			Change
			_ Iladd
			□Remove
			Change
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Note: If	e date, if other than t tive date is listed, the date r the date inserted in this n's effective date on the	block does not m	reating be prior up neet the applicab	date of filing or more	(option than 90 days after figurements, this c	ing.) Pursuant to 605,0207
e record rd is file	specifies a delayed effec d.	tive date, but not	an effective time	2, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
rs 1	July 15	<u> </u>	2020	. •		
Dated	CKI	5	1/1/10	. ~ .		
Dated	A S	Signature of a n	nember or anythorn	ed representative of a	a member	

Filing Fee: \$25.00