

L.O 900000/2950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

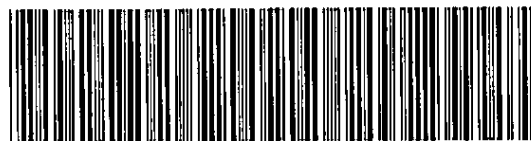
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900337525379

10/24/19--01031--001 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2019 OCT 24 AM 8:41

L.C.
Amend
11/21/19
JC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIQUNITY, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MERRITT A. GARDNER

Name of Person

GARDNER LAW FIRM

Firm/Company

5415 MARINER STREET, STE. 200

Address

TAMPA, FLORIDA 33609

City/State and Zip Code

MGARDNER@MAGARDNER.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MERRITT A. GARDNER 813 288-9600
Name of Person at () Daytime Telephone Number
Area Code

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

FLORIQUEITY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/09/2009 and assigned
Florida document number L09000012950.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

5612 S. Manhattan Ave.

Tampa, Florida 33616

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
2019 OCT 24 AM 8:41

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida 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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Mach, Tomas	5612 S. Manhattan Ave.	<input type="checkbox"/> Add
		Tampa, Florida 33616	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Machova, Judita	5612 S. Manhattan Ave.	<input type="checkbox"/> Add
		Tampa, Florida 33616	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Mach, Miroslav	5612 S. Manhattan Ave.	<input type="checkbox"/> Add
		Tampa, Florida 33616	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Mach, Jakub	5612 S. Manhattan Ave.	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33616	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 18 2019

Judita Machova

Typed or printed name of signee