409000055426

(Req	uestor's Name)	
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A. BUTLER

DEC 1 2 2022

COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT:		LLC ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter (to the following:	
	Jerem	iah Simon Name of Person	
		Firm/Company	
	150 S Pin	e Island Rd, S	TE 300
		on FL 33324 City/State and Zip Code . 5 i m'on @ 9 mail o be used for future annual Report notif	
For further information cor	neerning this matter, please ca		ioni,
Jeremia V Name of F		at (954) 270 Area Code Daytime	- 7357 Telephone Number
Enclosed is a check for the	following amount:		
\$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:		Street Address:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

О	F
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) LLC ny as it now appears on our records.) Liability Company) SECRET TAIL AND STATE were filed on Oto O8 2009 and assigned
The Articles of Organization for this Limited Liability Company Florida document number <u>L0900055426</u>	were filed on 06/08/2009 and 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 Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	150 S Pine Island Pd 5TE 300 Plantation, FL 33324
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	150 S Pine Island Rd STE 300 Plantation, FL 33324
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	enddress on our records, enter the name of the new registered

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Finer Florida street address

Plantation Florida 33324

City Zip Code

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>	Address	Type of Action
& MGR	Cherelle Simon	150 3 Pine Island Rd STE	3 ^C DAdd
		Plantation, FL 33324	□ Remove
			□Change
MGR	Clifton James Simo	150 S Pine Island R	d Shad
	_11	Plantation, FL 33324	
			□Add
			□Remove
			□Change
			
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
			Change

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an offer lote: I	the date, if other than the date of filing:
record Lis file	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 d.
ated _	September 13. 2022. Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Jersmiah Simon Typed or printed name of signee
	Typed or printed name of signee

Filing Fee: \$25.00