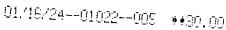
L09000076115

(Re	equestor's Name)	
(Ac	ldress)	
(Ác	ldress)	·
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: ADOP!	La Plaque + Trop	hy LLC.	
300000 <u>-131-1</u>	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	James Thorn	Name of Person	
	Apopka Plaqu	E+Trophy, L.L.C.	
	535 (ooper Co	mmerce Dr, #310	
	Apopka FL 3 Cooperdat®ao	2703 City/State and Zip Code	
	Cooperdat Dao E-mail address: (to be used for future annual report notif	ication)
For further information e	oncerning this matter, please c	all:	·
James Tho	ornton f Person	at (<u>407</u>) <u>889-</u> Area Code Daytime	3a13 - Telephone Number
Enclosed is a check for the	nc following amount:		e e
□ \$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 S	Section	Street Address: Registration Sec	
Division of C P.O. Box 632		Division of Corp The Centre of T	
Tallahassee, l			attanassee Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Apopka Plaque + Trophy	, L.L.C.		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now a imited Liability Comp	appears on our records.) oany)	
The Articles of Organization for this Limited Liability Con Florida document number <u>L0900076115</u>		on August 7,2009	and assigned
This amendment is submitted to amend the following:	-		
A. If amending name, enter the new name of the limite	ed liability compa	<u>ny here</u> :	
			_
The new name must be distinguishable and contain the words "Limite	ed Liability Company,	the designation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	ESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on o	our records, <u>enter the name of</u>	the new registered
Name of New Registered Agent:			<u>.</u>
New Registered Office Address:			C.
	Ente	r Florida street address	
<u></u>		, Florida	
	City	2	ip 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:

	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Lloyd T. Brown	3409 Seminole Dr	
		Apopka FL 32703	Remove
			□Change
MGR	Debra A. Thornton	Jag May Day Dr Apopka FL 32712	tAdd
		Apopka FL 32712	Remove
			□Change
			Remove
			□Change
			□Add
			□Remove
			□Change
·			□Add

_____ Петоvе

______ Change

	ding any other information, enter change(s) here: (Attach additional sheets, if neces	.sur _. v., _j
_		
_		<u> </u>
		
		
		· <u>·</u>
-		
		
		
Effective	date if other than the date of filings	
	date, if other than the date of filing:	at) ing.) Pursuant to 605,020 ate will not be listed a:
he record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
		; -
Dated	January 10 2024	
Dated	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00