L10000084908

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	04/29/2021		
	Marcel Ogbonna-A	Amu	
Reference	#:1364883		
	e:	FINNEGANS, LLC	
_	cles of Incorporation/Auth	norization to Transact Business	
	nge of Agent		ANY ISSUES, CALL MARCEL:
	nstatement version		(518) 213 - 0826 Thank you!
☐ Mer	ger		
Diss	olution/Withdrawal		
☐ Ficti	tious Name		
Othe	er		
	Amount: \$25		
Signature:	Monacel og A	Delifit Firmin	

F: +852.7682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	04/29/2021		
	Marcel Ogbonna-Amu	<u> </u>	
Reference	#:1364883		
	e: FI	NNEGANS, LLC	
	eles of Incorporation/Authoriza		
✓ Ame	endment		
Cha	nge of Agent		ANY ISSUES, CALL MARCEL:
☐ Rein	statement		(518) 213 - 0826
Con	version		Thank you!
☐ Merç	ger		
☐ Diss	olution/Withdrawal		
☐ Fictif	tious Name		
Othe	er		
Authorized	Amount: \$25.00		
Signature:	Marcel og bonne	- America	

F: 800.944.6607

F: +852.2687.9790

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2521 APR 29 NI 7:59

	FINNEGANS, LLC		· 	
(Name of the Limited Li (A F	ability Company as it now appea orida Limited Liability Company)	ers on our records.)		
The Articles of Organization for this Limited Liabili Florida document numberL10000084908		August 13, 2010	and assigned	
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liability company h	ere:		
The new name must be distinguishable and contain the words	"Limited Liability Company," the	designation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable	;		 	
(Principal office address MUST BE A STREET A	DDRESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	23371	23371 BLUE WATER CIRCLE C-313		
	E	BOCA RATON. FL 33433		
B. If amending the registered agent and/or registered agent and/or the new registered office		n our records, <u>enter</u>	the name of the new	
Name of New Registered Agent:	COGEN	COGENCY GLOBAL INC.		
New Registered Office Address:	115 CALHOUN STREET, STE. 4			
	Enter Florida street address			
_	TALLAHASSEE	, Florida	32301	
	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.

/s/Eric Hood ERIC HOOD, Assistant Secretary

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		2321 APR 29 AH 7:59	
<u>Title</u>	Name	Address	Type of Action
MGR	MARY SUE DONOHUE	23371 BLUE WATER CIRCLE C-313, BOCA RATON, FL 3343	3 L_ Add
			CrRemove
			(MChange
			Add اس <u>'</u>
			& Remove
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(If an effective Note: If the	ate, if other than the date of date is listed, the date must be spec date inserted in this block doe offective date on the Departme	itic and cannot be prior to da s not meet the applicable	te of filing or more than 90 statutory filing requirem	_ (optional) days after filing.) Pursuant to 60 ents, this date will not be lis	05.0207 (3 sted as th
	specifies a delayed effec a day after the record is		effective time, at 1	.2:01 a.m. on the earl	lier of:
Dated	April 29 M. a. Z. J. Signatu				
	marcy du	e bono h	re		
	- O Signatu	e of a member or authorized	representative of a member	т	

Page 3 of 3

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