L11 0000 5 26 81

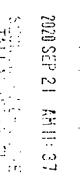
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500352463425

09/21/20--01022--026 **25.00



O BRUCE

COVER LETTER

TO:		tration Sect on of Corpo			•	,			
SUBJEC		RICKELL'N	MATTRESS, LLC	•	•	•			
30031.0	c		Name of Lim	ited Liability Company	y				
The encl	losed A	rticles of A	mendment and fee(s) are sub	mitted for filing.					
Please re	eturn al	l correspond	dence concerning this matter	to the following:					
			MITCH HELFER CPA						
				Name of Person	n				
			CPAMIAMI						
				Fimt/Company					
			215 ROMANO AVE						
				Address					
			CORAL GABLES FL 331	34-7243					
				City/State and Zip (Code				
			INFO@CPAMIAMI.COM						
			E-mail address: (to be used for future ar	anual report notif	ication)			
For furth	ner info	rmation con	cerning this matter, please co	all:			70 	2020	
МІТСН	HELF	ER		305 at (567-3152			2020 SEP 2	-
		Name of F	Person	Area Code	Daytime	: Telephone Number		_	
Enclosed	d is a c	heck for the	following amount:						***
■ \$25.00 F		ng Fee	□ \$30.00 Filing Fee & Certificate of Status	s Certified Copy (additional copy is enclosed)		Certified C	of Status &	37	
	Mailir	ı <u>g Address:</u>		Stre	eet Address:				

Mailing 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

BRICKELL MATTRESS, LLC

(<u>Name of the Limited Liability C</u> (A Florida Lin	company as it now appears on our records.) inited Liability Company)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
The Articles of Organization for this Limited Liability Com	pany were filed on MAY 24, 2011	and assigned
Florida document number L11000052681		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	Hiability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company "the designation "LLC" or the abbi	reviation "L.I.C."
The Real Halle that the distinguishment and contain the violes. Estimed	Salomy Company. The designation thise of the designation	D.2.0.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	
Enter new mailing address, if applicable:		
*		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of	The address on our records onter the name	of the new registered
agent and/or the new registered office address here:	nee address on our records, enter the name	of the new registered
		20
Name of New Projectored Agents		20 \$
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	gent:	# 13 T
I hereby accept the appointment as registered agent and	l agree to act in this canacity. I further agre	e to comply with the
provisions of all statutes relative to the proper and comp		
accept the obligations of my position as registered agen		
being filed to merely reflect a change in the registered of	ffice address, I hereby confirm that the limi	ted 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>	Type of Action
MGR	JUAN F QUINTERO	1030 SW 8th STREET	□Add
		MIAMI, FL 33130	■Remove
			□Change
AMBR	JUAN F QUINTERO	1030 SW 8th STREET	■Add
		MIAMI, FL 33130	□Remove
			□Change
MGR	MATT BYRD	1030 SW 8th STREET	□ Add
		MIAMI, FL 33130	Remove
			□Change
AMBR	MATT BYRD	1030 SW 8th STREET	= Add
		MIAMI, FL 33130	Tr (DRemo)'e
			☐ Change
			OALD T
			© Remove
			□Change
			□Remove
			□Change

						•	
							_
						···	
							_
		-11-		 -			
 -							
							
				<u></u>			
					·		
, _ , , ,	<u> </u>	<u> </u>				C.T.	20:
						<u> </u>	12020 SEF
						5	<u>는</u>
						37 A.) Ga	
							A
							 دی
				<u> </u>		- :::	
							
an effective date is li lote: If the date in	other than the date of sted, the date must be speci serted in this block does be date on the Departmen	fic and cannot be pro not meet the app	rior to date of filir dicable statutor	ng or more than 90 d			
	delayed effective date, b	ut not an effective	e time, at 12:01	a.m. on the earlie	er of: (b) The	90th day a	ifter th
record specifies a (•						

Filing Fee: \$25.00