

211000124036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

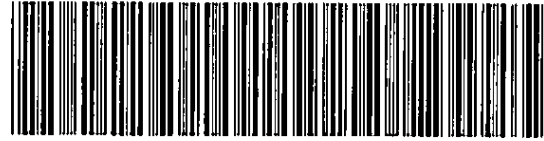
(Business Entity Name)

(Document Number)

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2019 OCT 15 PM 1:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Y SULKER

Oct 31 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: U.S. & Int. Franchising 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:

Yolanda  
Name of Person

same  
Firm/Company

P O B 30301  
Address

P. B. G. FL. 33420  
City/State and Zip Code  
rose/g@comcast.net  
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yolanda at 561-531-3481  
Name of Person Area Code Daytime 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)

*Paid before check #109  
10-1-19*

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

*checks enclosed  
10-1-19*

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

U.S. & Int. Franchising 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 Oct 31<sup>st</sup>, 2011 and assigned Florida document number L11000124036

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5039 Magnolia Bay Cir.  
P.B.G. FL. 33410

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 30304  
P.B.G. FL. 33410  
2011 OCT 15 11:08 AM  
STATE OF FLORIDA  
CLERK OF THE COURT

**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:

Yolanda Lannquist Lucasta  
5039 Magnolia Bay Cir.  
Palm Beach Gardens, Florida 33410  
Enter Florida street address  
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.*

Yolanda Lannquist Lucasta

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	Yolanda	P.O. B 30301	<input type="checkbox"/> Add
AMBR	Kannquist	P. B. G FL. 33420	<input type="checkbox"/> Remove
OWNER	Lacusta		<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 405.0207 (3)(b)

Dated Oct 29, 19

Yolanda Larung Chol. Larungba

Volencia Hennigst Hachist  
Typed or printed name of signer