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DIVISION OF CORPORATION

N COOPER MAY 2 4 2018

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT: Name of Limited Liability Company	
The er	oclosed Articles of Amendment and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Name of Person	
	Igro Delight Firm/Company	
	9880 V. a Bernini Address	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For fu	rther information concerning this matter, please call:	
	RUSmi Akel at (51) 868-5588 Name of Person Daytime Telephone Number	
Enclos	sed is a check for the following amount:	
T 52	55.00 Filing Fee Solution Status Solution Status Solution	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

· ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Igloo D.	elight LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it ndw appears on our records.) iability Company)		
The Articles of Organization for this Limited Liability Company of Florida document number <u>L13 010054707</u> .	were filed on 13 pril 15 20	13 and assi	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili			C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	OUTION Park, FL	L 33444	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name o	of the new
Name of New Registered Agent:			SECF
New Registered Office Address:	Enter Florida street address	7 22	NOTARY OF CO
	, Florida	Zip Co	PRPCIA:
New Registered Agent's Signature, if changing Registered Agent:	C.1.)	.φ.σ 59	ATION

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:

MCD -	Manager		
MOK -	Manager		
AMRD =	Authorized Member		
WINDU -	- Authorizen iarennoer		

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMOR	nowher Al Massri	6851 w. Sunise Blvd Plantation, FL 33313	
		Plantation, FL 33313	Remove
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fective date, if other than the	date of filing	;:		(ор	tional)	
n effective date is listed, the date mussete: If the date inserted in this blo	ock does not m	eet the applical	odate of filing or mole statutory filin	ore than 90 days aff g requirements, tl	er filing.) Pursuar nis date will not	it to 605,02 be listed
cument's effective date on the De	epartment of St	tate's records.				
record specifies a delayed	effective d	ate, but not	an effective t	ime, at 12:01	a.m. on the	earlier
The 90th day after the reco	ord is filed.					
ited May 17		2018				
	,	->				
a con	Signature of a n	nember or author	ized representative	of a member		

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Filing Fee: \$25.00