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## **COVER LETTER**

	istration Se ision of Cor			
SUBJECT:	Pamela App	oel, LLC		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Pamela Appel		
			Name of Person	
		7378 Hazelwood Circle	Firm/Company	
		Lake Worth, Fl. 33467	Address	
		pamapp20@gmail.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notific	cation)
For further in	nformation co	oncerning this matter, please ca	all:	
Pamela App	el		561 251-0388 at ( )	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pamela Appel, LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears Liability Company)	on our records.)
he Articles of Organization for this Limited L lorida document number L14000009778		were filed on 01/1	
nis amendment is submitted to amend the following			<u>e</u> :
If amending name, enter the new name of	of the limited liab	oility company her	<u>e</u> :
te new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	
nter new principal offices address, if applic	cable:	7378 Hazelwood	Circle, Lake Worth, Fl. 33467
Principal office address MUST BE A STREI	ET ADDRESS)	*****	
nter new mailing address, if applicable:		7378 Hazelwood	Circle, Lake Worth, Fl. 33467
Auiling address MAY BE A POST OFFICE	<u>BOX)</u>		
. If amending the registered agent and egistered agent and/or the new registered o			our records, enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	7378 Hazelwoo		a street address
	Lake Worth		, Florida <sup>33467</sup>
		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.

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			Change
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His new address is 7378 Hazelwood	Circle, Lake Worth, Fl 334	67	1
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ive date, if other than the date dective date is listed, the date must be spe. If the date inserted in this block donent's effective date on the Department.	es not meet the applicable s ent of State's records.	atutory filing requireme	nts, this date will not be lis
cord specifies a delayed effe 90th day after the record is	ctive date, but not an filed.	effective time, at 1	2:01 a.m. on the earl
September 27	2018		

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Filing Fee: \$25.00