

214000112274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

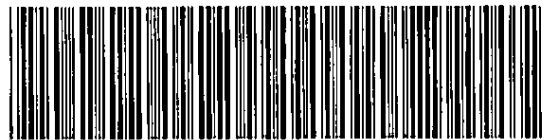
(Business Entity Name)

(Document Number)

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RECEIVED  
NOV 05 2018

FILED  
CLERK OF STATE  
RECORDS & DEEDS  
NOV 05 2018 AM 9:50

*Amended*

NOV 20 2018

D CUCHING

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Lommy Invest 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:

chant karajian

\_\_\_\_\_  
Name of Person

5 stars plus real esate services

\_\_\_\_\_  
Firm/Company

5315 park blvd , suite 3

\_\_\_\_\_  
Address

pinellas park, fl , 33781

\_\_\_\_\_  
City/State and Zip Code

eagleforce\_ck@hotmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

chant karajian

844

707-3773

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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)

**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

FILED  
DIVISION OF STATE  
CORPORATIONS  
JAN 10 2007  
TALLAHASSEE, FL  
10:40 AM

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

Lommy Invest LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
CLERK OF DISTRICT COURT  
10 NOV -5 PM 9:50

The Articles of Organization for this Limited Liability Company were filed on 07/16/2014 and assigned  
Florida document number L14000112274.

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 "L.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

5315 park blvd, suite 3,

pinellas park

33781

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

5315 park blvd, suite 3,

pinellas park

33781

**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:

5 stars plus real estate services llc

New Registered Office Address:

5315 park blvd, suite 3,

*Enter Florida street address*

pinellas park

Florida 33781

*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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Garnier, Olivier	10225 ULMERTON ROAD	<input type="checkbox"/> Add
		SUITE 9C LARGO, FL 33771	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	THOMAS, PATRICK	5315 park blvd, suite 3	<input type="checkbox"/> Add
		pinellas park, fl, 33781	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	THOMAS, VANESSA	5315 park blvd, suite 3	<input type="checkbox"/> Add
		pinellas park, fl, 33781	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: 10/30/2018 (optional)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated October 30, 2018

PATRICK THOMAS  
PATRICK THOMAS (Oct 31, 2016)

Signature of a member or authorized representative of a member

THOMAS, PATRICK

Typed or printed name of signee