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(((H20000369475 3)))



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To:

Division of Corporations

Fax Number : (650)617-6383

From:

Email Address:

Account Name : OLIVE JUDD, P.A. Account Number: 120200000171 : (954)334-2250 Phone : (888)503-5258 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1601 BLOUNT LLC

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Registration Section

TO:

COVER LETTER

Division	of Corpor	rations		*
	BLOUN	T LLC	•	
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed Artic	cles of Am	endment and fee(s) are sub-	mitted for filing.	
Please return all co	orresponde	ence concerning this matter	to the following:	
		VIOLET HOWES		
			Name of Person	
		1601 BLOUNT LLC		
			Firm/Company	
		1601 BLOUNT ROAD		
			Address	
		POMPANO BEACH, FL.	33069	
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		vhowes@glasslam.com		_ _ _
	•	E-mail address: (to be used for future annual report noti	fication)
For further inform	nation conc	erning this matter, please ca	all:	
Violet Howes			954 899-6981 at ()	
	Name of Po	rison	Area Code Daytim	e Telephone Number
Enclosed is a chec	ck for the f	following amount:		
■ \$25.00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclused)
Registr Divisio P.O. Bo	Address: ation Secon of Cor ox 6327 assee, FL	porations	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee e Street, Suite 810

10/23/2020 1:57 PM

To: 8506176383@rcfax.com Fax: (850) 617-6383 H20000369475 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City		Zip Code
	Fort Lauderdale	, Florida <u>3330</u>	1
New Registered Office Address:	2426 East Las Olas Blvd Enter Flo	prida street address	
	2476 Part Les Oles Dist		
Name of New Registered Agent:	Olive Judd PA		
igent and/or the new registered office addre	ss here:		
3. If amending the registered agent and/or	registered office address on our	records, enter the name o	of the new registe
Mailing address MAY BE A POST OFFICE	<u> </u>		
Enter new mailing address, if applicable:			₽-
Section and the section of the section block		事 奇	No.
		- 	p
Principal office address MUST BE A STREI	<u> </u>		23
Enter new principal offices address, if applic			8 11
			020
he new name must be distinguishable and contain the v	words "Limited Liability Company," the	designation "LLC" or the abbre	viation "L.L.C."
A. If amending name, enter the new name o	f the limited liability company b	<u>ere</u> :	
This amendment is submitted to amend the foll			
	······································		
Florida document number L14000118056			
The Articles of Organization for this Limited L	iability Company were filed on 0	7/28/2014	and assigned
(Name of the 15mm)	led Liability Company as it now appea (A Florida Limited Liability Company)	, and the state of	
(Name of the Limi	ted Lighility Company as it now appear	rs on our records.)	

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.

He Changing Registered Agent, Signature of New Registered Agent

From:	Olive	Judd,	P.A.
	•		

m: Olive | Judd, P.A. Fax: To: 8506176383@rctax.com Fax: (850) 517-6383 Page: 4 of 5 10/23/2020 1:57 PM

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	Stephen Howes	1601 Blount Road	□Add
		Pompano Beach, FL 33069	≡ Remove
			□Change
MGR	Gerhard Reichert	1601 Blount Road	≣∧dd
		Pompano Beach, FL 33069	Remove
			Change
			□Add 2020 C□ Remove
			Change Change Add
			□Change
			Change
			□Add
			Remove
			□ Change

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		1937) 1742	
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			·—
Fective date, if other than the date	of filing: October 12, 2020	(optional)	
Fective date, if other than the date an effective date is listed, the date must be sofe: If the date inserted in this block of	pecific and cannot be prior to date of fil	ing or more than 90 days after filing.) For filing requirements, this date w	ursuant to 605.020 ill not be listed a
ocument's effective date on the Depart	ment of State's records.	, S	
ecord specifies a delayed effective dat is filed.	e, but not an effective time, at 12:0	l a.m. on the earlier of: (b) The	90th day after th
October 22	2020		
atea			
October 22 October 22 October 22 Sign			