L14000138477

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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08/27/24--01008--001 **52.50

124 SEP 16 PM 2: 5

COVER LETTER

	gistration Section vision of Corporati	ons				
SURJECT		MERIC	uc			
501701761		MFBIS Name of I	Limited Liability	y Company		
The enclose	d Articles of Amen	dment and fee(s) are:	submitted for t	filing.		
Please retur	n all correspondence	e concerning this mat	ter to the follo	wing:		
	_	S	au vel	Coffe N	J	
			Nemis			
				/Company		
		10763	3 <u>B</u> u	AC KHAWK	51	
		Pl		and Zip Code	33324	
		E-mail addres	s: (to be used fo	or future annual repo	rt notification)	
For further	nformation concerr	ing this matter, pleas	e call:			
			at ()	aytime Telephone Number	
	Name of Perso	n	,	Area Code — E	aytime Telephone Number	
Enclosed is	a check for the follo	owing amount:				
\$25.00	-	\$30.00 Filing Fee & Certificate of Status	Cert (addi	00 Filing Fee & tified Copy itional copy is enclosed	(additional copy is e	atus & nclosed).
you x	peceivep	CHPCK	ON F	necious	CORNESPONDANCE	Ceffer #
M:	niling Address:			Street Addre	ss:	(724 A 000 19)
	gistration Section	on		Registratio		
	vision of Corpor	rations			Corporations	
	O. Box 6327	214			of Tallahassee	
Та	llahassee, FL 32	314		2415 N. M	onroe Street, Suite 810	

Tallahassee, FL 32303



August 30, 2024

SAMUEL COHEN 10763 BLACKHAWK ST. PLANTATION, FL 33324

SUBJECT: MERIS LLC

Ref. Number: L14000138477

We have received your document for MERIS LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 724A00019534

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 SEP 16 PM 2: 54

Meris L	LC	1100
(Name of the Limited Liability (A Florida Li	ompany as it now appears on our nited Liability Company)	records LLAHASSEE, FLORIDA
The Articles of Organization for this Limited Liability Con Florida document number <u>L /400013 84 77</u>	pany were filed on09/	0/2014 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	l 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 ADDRE	<u>s)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of	ffice address on our records,	enter the name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		/
New Registered Office Address:	Enter Florida street	address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered A		
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age	plete performance of my duti	es, and I am familiar with and

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>	Address Type of Act	<u>tion</u>
MGR	MERCEDES HAYLON	10763 BUACKHAWK ST OKAdd	
	COHEN	PLANTATION, FL 33324 Remove	;
		Change	
		□Remove	:
		Change	
		□Remove	;
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(If an effective Note: If th	late, if other than the date is listed, the date in e date inserted in this later than the effective date on the	ust be specific and block does not n	cannot be prior to dieet the applicable			ig.) Pursuant to 60	
f the record spe ecord is filed.	cifies a delayed effect	ive date, but not	an effective time	, at 12:01 a.m. on	the earlier of: (b)	The 90th day aft	er the
Dated	SEPT	09	2024		800	5	
-		Signature of a r	nember or authoriz	ed representative of	î a nî em ber		
					SAMUES	WHEN	
-			Typed or printed r	ame of signee	v.n jue	WITLV	

Filing Fee: \$25.00