## L14000148527

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

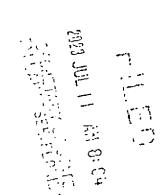
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A. RIVERS AUG 1 7 2023



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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

	terprises, LLC	•	•	
SUBJECT:	Name of Lim	ited Liability Company	· ·	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Maria A Lee			
		Name of Person		
	Escreve Enterprises, LLC		t notification)  7434  aytime Telephone Number  \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	<del></del>	Firm/Company		
	10666 S.W. 79th Terrace			
	<del></del>	Address		
	Miami, Florida 33173			
		City/State and Zip Code	, ,,,, · · · · · · · · · · · · · · · ·	
	alex.lee876@gmail.com			
	E-mail address: (	to be used for future annual report not	dification)	
For further information of	oncerning this matter, please ca	all:		
Maria A Lee		305 305878743- at ()		
Name o	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
<b>■</b> \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy	
Mailing Address		Street Address:		
Registration Section Division of Corporations		<del>-</del>	Registration Section Division of Corporations	
P.O. Box 632	•		•	
Tallahassee, I	FL 32314	2415 N. Monro	pe Street, Suite 810	

Tallahassee, FL 32303

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

Escreve Enterprises, LLC		
( <u>Name of the Limited Liability</u> (A Florida)	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 09/19/2014	and assigned
Florida document number L14000148527	<u></u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C,"
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRI	ESS)	
	<del>.</del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	·	299
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the n	name of the new register
igent and/or the new registered office address here.		- 100 P
Name of New Registered Agent:	<del></del>	7
New Registered Office Address:	Enter Florida street address	<u> </u>
	Timer T to the bill the beautiful	_ 1
	, Florida	•

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>	Address	Type of Action
AMBR	Maria A Yap	10666 S.W. 79th Terrace, Miami, FL. 33173	□Add
		*******	=Remove
			□Change
AMBR	Maria A Lee	10666 S.W. 79th Terrace, Miami, Florida 33173	<b>=</b> Add
			□Remove
			□Change
			□ Add
			□Remove
		<del></del>	□Change
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			□Remove
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			□Change
<u></u>			🗀 Add
			□Remove
			□Change

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