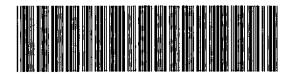
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: CORRECTED DOCUMENT PER CONVERSATION WITH ROBERT POLANCO 10/6/2015 KS

Office Use Only

Shares or Stock



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PILED
2015 OCT -6 PM 5: 52
SEURETARY OF STATE

K. SALY EXAMINER OCT \_ 6 2015



September 28, 2015

OMG FAST PC LLC ROBERT POLANCO 74 ROSEWOOD CIR BOYNTON BEACH, FL 33436

SUBJECT: OMG FAST PC LLC Ref. Number: L15000009555

We have received your document for OMG FAST PC LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Chapter 605, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 015A00020469

Karen A Saly Regulatory Specialist II

www.sunbiz.org

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DMG PAST PC, ZLC  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:
Pobert Polanco Name of Person
ONG FAST PC, UC Firm/Company
14 Rosewood Circle
Boyeston Beach PC 3343-6 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
EVANDED CARVALTO at (154) 433 - 8885  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee,

#### 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

## ARTICLES OF AMENDMENT TO

OF	FILED
OMA PAST PC 11C	2015 OCT -6 PM 5: 52
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	TALLAHASSEE STATE
The Articles of Organization for this Limited Liability Company were filed on 1/16/2019	and assigned
Florida document number <u>L/50000 9.555</u>	

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility 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)	6193 POCK ISLAND ROAD SortE SLG TAMARAC, PL 33319
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	5193 POCK ISLAND POAD SUNE SIL TAMARAC PL 33319
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.	office address on our records, enter the name of the new re:
Name of New Registered Agent: Release	4 Polanco
New Registered Office Address: 6/93	Pock PSIAND ROAD SOTE 516 Enter Florida street address
TAV	City, Florida 3319 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 Title . Type of Action Name Address Robert Polaria 14 lose word Cirle Boynan Beach Pr 33936 ☐ Remove \_ Change ☐ Remove hange T ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change \_□ Add

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lf an effect <u>Note:</u> If	e date, if other than the date of filing:	07 (3)(b) as the
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.	of:
	1	
Dated	9-22-2015 /2015	
<del></del>	Signate of a member or authorized representative of a member	
	Digital of a motified of authorized representative of a memori.	
	EUNING CARVALHO	

Page 3 of 3

Filing Fee: \$25.00