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COVER LETTER

Tallahassee, FL 32314

	Registration So Division of Co				
SUBJEC1	•	lge Source LLC			
SOBJECT	·	Name of Lin	nited Liability Company		_
The enclos	sed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
Please retu	ırn all correspo	ondence concerning this matter	to the following:		
		Natalie Charow			
			Name of Person	7.0	_
		Leading Edge Source LLC	•		
			Firm/Company		_
		P.O. Box 934956			
		_	Address		;
		Margate, FL 33063			•
		natalie.charow@chem-usa.c	City/State and Zip Code		<u> </u>
			to be used for future annual rep	port notification)	
For further	information c	oncerning this matter, please c	all:		
Natalie Ch	narow		954 556-1		
	Name o	f Person	at () Area Code	Daytime Telephone Nun	iber
Enclosed is	s a check for th	ne following amount:			
≅ \$25.00) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclos	Certif ed) Certif	O Filing Fee. ficate of Status & fied Copy onal copy is enclosed)
	lailing Addres		<u>Street Add</u> Registrati	ress: on Section	
D	ivision of C	orporations	_	of Corporations	
P	.O. Box 632	7		re of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Leading Edge Source LLC			
(<u>Name of the Limi</u>	ted Liability Compa (A Florida Limited	iny as it now appears on our reco Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited L	iability Company	were filed on 01/08/2016	and assigned
Florida document number L16000006488	•		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	oility company here:	
The new name must be distinguishable and contain the w	vords "Limited Liahi	lity Company "the designation "L1	C" or the abbreviation "LT C"
Enter new principal offices address, if applic		10440 South Barnsley Drive	
Principal office address MUST BE A STREET ADDRESS)		Parkland, FL 33076	
			<u> </u>
Enter new mailing address, if applicable:		P.O. Box 934956	=
(Mailing address MAY BE A POST OFFICE BOX)		Margate, FL 33063	
	_ _		म्मं ज
3. If amending the registered agent and/or r gent and/or the new registered office address Name of New Registered Agent:	egistered office : ss here:	address on our records, <u>ente</u>	r the name of the new regis
	10440 C1 12	1 5	··· <u></u>
New Registered Office Address:	10440 South Ba	arnsley Drive Enter Florida street addr.	ar.
	Parkland		lorida
		City , P	Zıp 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 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>	Name	Address	Type of Action
MGR	Carrie Charow	10440 South Barnsley Drive	□Add
		Parkland, FL 33076	□Remove
			■Change
AP	Natalie Charow	10440 South Barnsley Drive	□Add
		Parkland, FL 33076	□Remove
AP	Kenneth Charow	10440 South Barnsley Drive	
		Parkland, FL 33076	🗀 Remove
			■Change
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ctive date, if other than the	date of filing:		(optional)	
effective date is listed, the date muses: If the date inserted in this bl	lock does not meet the :	applicable statutory	g or more than 90 day: filing requirement	s after filing. s, this date	will not be listed a
iment's effective date on the D	epartment of State's re	cords.			
ord specifies a delayed effectiv filed.	e date, but not an effec	tive time, at 12:01	a.m. on the earlier	of: (b) Th	e 90th day after th
ined.					
ed August 15	2024				
-u		·			
Arta	Lie Chare Signature of a member o	411			
	a conto	7/			
•	Signature of a member of	r authorized represen	tanve of a member		

Filing Fee: \$25.00