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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations			
	LAN HARRIS CO 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	ondence concerning this matter	to the following:		
	EDWARD A MOSSA			
		Name of Person		
	BRIAN A HARIS CO LLO	C		
		Firm/Company		
	140 NW 20TH ST			
		Address		
	WILTON MANORS, FL 3	33311		
	L'AMOSSA 1520@CMAII	City/State and Zip Code		
	EAMOSSA1539@GMAIL E-mail address: (to be used for future annual report no	tification)	
For further information of	oncerning this matter, please c	all:		;~
EDWARD A, MOSSA		954 205-8438 at ()		<u> </u>
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			3 3 3
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Cop (additional copy	Fee: (Fee: A Control of Status & Control of St
Mailing Addres		Street Address: Registration S	ection	
Division of C	Corporations	Division of Co	orporations	
P.O. Box 632	. <i>1</i>	The Centre of	i ananassee	

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRIAN ALLAN HARRIS CO LL			
(Name of the Lim	ited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited I		16-2016 and as	signed
lorida document number L16000044749	·		
his amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :	
he new name must be distinguishable and contain the	words "Limited Liability Company," the de	esignation "LLC" or the abbreviation "L	L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	ROY)	· · · · · · · · · · · · · · · · · · ·	<u></u>
maning dauress HAT DE ATOST OFFICE	<u></u>		
			•
B. If amending the registered agent and/or	registered office address on our re	cords, enter the name of the ne	w regi
gent and/or the new registered office addr		P3 (
		<i>`</i> → (· ¦
Name of New Registered Agent:	EDWARD A MOSSA		ر ——
New Registered Office Address:	140 NW 20TH ST		es.,
	Enter Flor	ida street address	
	WILTON MANORS	, Florida 33311	
	City	Zin 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.

Edew Q- Wors

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>	<u>Address</u>	Type of Action
MGR	BRIAN ALLAN HARRIS	140 NW 20TH ST, WILTON MANORS, FL 33311	🗆 Add
			\exists Remove
			□Change
AMBR	BRIAN ALLAN HARRIS	140 NW 20TH ST, WILTON MANORS, FL 33311	□Add
			Remove
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ective date, if other than the effective date is listed, the date muster: If the date inserted in this blument's effective date on the De	ock does not meet the applicable statu	(optional) filing or more than 90 days after filing.) Pursuatory filing requirements, this date will no	ant to 605.0 ot be listed
cord specifies a delayed effective s filed.	e date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 90th	day after t
JUNE 28TH	2021		
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