## L16000 081 333

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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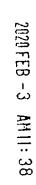


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S TALLENT FEB - 3 2020



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January 17, 2020

STEVE RAJNATH IMPEL ZONE, LLC 14710 NW 11 CT. MIAMI, FL 33168

SUBJECT: IMPEL ZONE, LLC Ref. Number: L16000081333

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

MR IS NOT AN ACCEPTABLE TITLE FOR AN AUTHORIZED PERSON. PLEASE SEE TITLES LISTED AND RESUBMIT.

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) 245-6050.

Susan Tallent Regulatory Specialist II

2020 FED -3 (N.H.: D.2

Letter Number: 620A00001335



December 23, 2019

STEVE RAJNATH IMPEL ZONE, LLC 14710 NW 11TH CT. MIAMI, FL 33168

SUBJECT: IMPEL ZONE, LLC Ref. Number: L16000081333

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE STATEMENT OF CORRECTION CANNOT BE USED TO CORRECT AN ANNUAL REPORT. PLEASE USE THE AMENDMENT TO THE ARTICLES OF ORGANIZATION FORM PROVIDED.

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) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 319A00026100

## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
STRIRGE IMOF	EL ZONE LLC.		
3003EC1. 11199	FL ZONE, LLC.	ed Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ndence concerning this matter to	o the following:	
	STEV	E RAJnath	
		Name of Person	
	IMPE	EL ZONE LLC	2.
		Firm/Company	
	1471	O NW 11ct.	
		Address	
	N 1: An	1. El 33161	3
		11 FL 33161 City/State and Zip Code	<u></u>
	Steverginath	De used for future annual report notif	ication)
For the thor information of	oncerning this matter, please cal	,	(Canon)
ron maner mornation c	oncerning this matter, picuse cai		
STEUE	RAJNATH	at ( <u>786)</u> <u>587</u> Area Code Daytime	- 8648
Name o	t Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	-	<b>-</b>	<b>7</b> •••••••
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee. Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
Mailing Addres Registration 5		<u>Street Address:</u> Registration Sec	tion
Division of C		Division of Corp	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMPEL ZON	IE, LLC			
(Name of the Limited (A	<u>Liability Company a</u> Florida Limited Liabi	<u>s it now appears on</u> lity Company)	<u>(our records.</u> )	
The Articles of Organization for this Limited Liab Florida document number <u>L160000</u> &	• •	e filed on	5/1/201	6 and assigned
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liability	company here:		
The new name must be distinguishable and contain the word		'ompany," the desig	nation "LLC" or the ab	breviation "L.L.C."
(Principal office address MUST BE A STREET)	<u>ADDRESS)</u>	<del>-</del>	<del></del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	 <u></u> <u></u>			2020 FEB - 3
B. If amending the registered agent and/or reg agent and/or the new registered office address b		ress on our reco	rds, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:	STEVE	RAJNA	TH.	
New Registered Office Address:	14710	H (D) Enter Florida	street address	
	Mi	<del>TMI</del>	, Florida	33168 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	STEVE RAJNATH	14710 NW11ct.	<u>L</u> _ <u>.</u>
(AMBR)		14710 NW11ct. MiAMI, FL 33168.	Remove
			(MChange
			DAdd
			□Remove
		<del>-,,.</del>	Change
			□Add
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			Change

Effective date, if other than the date of filing:  (an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 695,0207 Note; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d is filed.  That I are a support of a member or authorized representative of a member.		
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Signature of a member or authorized representative of a member	ated	January 812 2020
Signature of a member or authorized representative of a member		x france
		Signature of a member or authorized representative of a member
· ( = 1		Steve Ralnath Typed or printed name of signee

Filing Fee: \$25.00