## LIL OCCOST370

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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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5. C.



April 27, 2021

JASON DELIMITROS 3080 N.E. 40TH CT FT. LAUDERDALE, FL 33308

SUBJECT: AJMK, LLC

Ref. Number: L16000087370

We have received your document for AJMK, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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.

Summer Chatham OPS

Letter Number: 521A00008694"

www.sunbiz.org

## COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: AJ	MK LLC		
300at.c.r	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Jason	T. Delimitros Name of Person	
	AJMA	S LLC Firm/Company	
		Firm/Company	<del></del>
	3080 N	YE 4015 CT	
		Address	
	Fort Lau	Sirdele FL 33308 City/State and Zip Code	y
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notifies	ation)
For further information co	oncerning this matter, please ca	all:	
——————————————————————————————————————	7) / 100	054 278 C	20 21 22
Name of	Delimitwo Person	at (954) 328-53 Area Code Daytime 1	elephone Number
Enclosed is a check for th	e following amount:		D 2
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address</u> Registration S		<u>Street Address:</u> Registration Secti	ion
Division of C	orporations	Division of Corpo	orations
P.O. Box 632 Tallahassee, F		The Centre of Tal 2415 N. Monroe	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANTINICCE		
(Name of the Limited Liability Compa (A Florida Limited I	my as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>416 0000 \$7370</u> .	were filed on <u>5-3-2016</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the na	ime of the new registered
agent and/or the new registered office address here:		<b>=</b> 1
Name of New Registered Agent:		
New Registered Office Address:		J <sub>2</sub>
· · · · · · · · · · · · · · · · · · ·	Enter Florida street address	ω 
	, Florida _	
	City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

XTMV //C

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>	<u>Name</u>	Address	Type of Action
M6 R	Jason T Delimities	308U NE 40th CT	<b>&amp;</b> Add
		3080 NE 40th CT Ft. Landerdele, FL 33308	□Remove
			🗆 Change
			□Add
			🗆 Remove
			□Change
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ffective date, if other than the date of filing: 3-1-2031 an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90	(option	al)	U	
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requirem ocument's effective date on the Department of State's records.	days after fil	ing.) Pu ate wil	ils Mant to Lapot be CO	605- <b>6</b> 207 ( listed as 1
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the early list filed.	ier of: (b)	The 9	Oth day :	ifter the
Jared 3-10-2021				
<i>d</i> 1				
Signature of a member of authorized representative of a member	er	-		-