

L16 000120826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

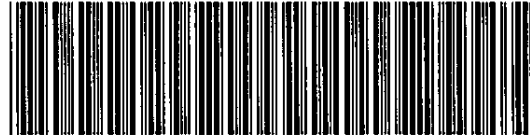
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 06 2016
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMB FUTURE CONCEPTS LLC
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:

LORETTA VALERO-SMITH
Name of Person

AWS BOOKKEEPING & ACCOUNTING INC.
Firm/Company

2061 NW 2nd Ave Ste 203
Address

BOCA RATON, FL 33431
City/State and Zip Code

awsbkpg@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORETTA VALERO-SMITH at (561) 394-0980
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
☐ \$30.00 Filing Fee & Certificate of Status
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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2016 JUL -5 PM 5:15
TALLAHASSEE, FL
SECRETARY OF
CORPORATIONS

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

AMB FUTURE CONCEPTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L 16000120826

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

701 S. SWINTON AVE APT G
DELRAY BEACH, FL 33444-2377

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

701 S. SWINTON AVE APT G
DELRAY BEACH, FL 33444-2377

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

AWS BOOKKEEPING & ACCOUNTING INC.

New Registered Office Address:

2061 NW 2nd Ave Ste 203

Enter Florida street address

BOCA RATON

City

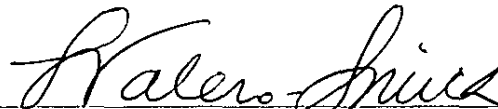
Florida

33437

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>	<u>Address</u>	<u>Type of Action</u>
MGR	BZEZINSKI, ASHLEY	198 NW 67th STREET	<input type="checkbox"/> Add
		APT 405, BOCA RATON, FL 33487	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CALE M. PAINE	701 S SWINTON AVE APT G	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33444	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This image shows a single page from a notebook or ledger. It features approximately 20 horizontal blue ruling lines spaced evenly down the page. The left edge of the page shows the binding of the book, which appears to be made of dark material. There are some faint marks and shadows along the top and bottom edges, suggesting it's part of a bound volume. The overall appearance is that of a clean, unused page ready for writing.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

7-1-16



Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Cole Paine
Typed or printed name

Typed or printed name of signee

SECTION 10 OF
TALLAHASSEE, FLORIDA

2015 JUL -5 12:57