

L16000125935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

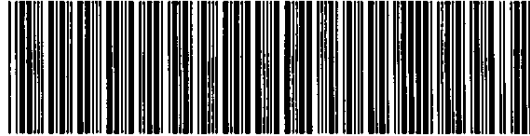
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/02/16--01004--029 **25.00

AUG 02 2016
J. HARRIS

FILED
2016 AUG -1 AM 8:22
16 AUG -1 PM 1:13
TALLAHASSEE, FL 32304
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cover LETTER

7/25/16

Addressed to attention: Division of Corporations, 2661 Executive center Circle,
Tallahassee, FL, 32301

Enclosed check for \$25 filing fee payable to Florida Department State

Return address: Daniel Cousin, 4801 Linton Blvd Suite 11a – 490 / Delray Beach, FL 33445

Email address: dc2728@gmail.com

Reason for amendment: *I would like to add Jeanette Coleman to be designated as an Authorized Person (AMBR) of the company Countdown LLC.*

Sincerely,



Daniel Cousin

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Countdown 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:

Daniel Cousin

Name of Person

Firm/Company

4801 Linton Blvd, suite 11a-490

Address

Delray Beach, FL 33445

City/State and Zip Code

dc2728@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Cousin, M.D.

646 303 3125
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
Tallaha

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Countdown 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 July 1, 2016 and assigned
Florida document number L16000125935.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City 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>
AMBR	Jeanette Coleman	4801 Linton Blvd, suite 11a-490,	<input checked="" type="checkbox"/> Add
		Delray Beach, FL 33445	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 16 JG - PM
 13

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated _____, _____.

Daniel Cousin

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

RECEIVED
7/25/2016
16 AUG - 1 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA