

L14 000 150030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

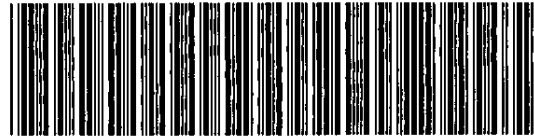
(Business Entity Name)

(Document Number)

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05/23/17--01035--003 **25.00

SECRETARY OF REVENUE
TALLAHASSEE, FLORIDA
17 MAY 23 AM 7:43

MAY 23 2017
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 430 Team LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jose L Perez
Name of Person

430 Team LLC
Firm/Company

17707 NW Miami Gl #101
Address

Miami, FL 33169
City/State and Zip Code

Joeteam@Bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joe Perez at (305) 215-5896
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

430 Team 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 08-11-16 and assigned
Florida document number L16000150030

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) _____

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>
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AMBR	Dustin Asher	1049 NW 50 Drive	<input checked="" type="checkbox"/> Add
		Deerfield Beach, FL 33064	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

AMBR	Pandra Potopsingh	1049 NW 50 Drive	<input checked="" type="checkbox"/> Add
		Deerfield Beach, FL 33064	<input type="checkbox"/> Remove
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17 MAY 23 PM 1:43
SECURITY
ATTN: SE
OFFICE

17 MAY 23 PM 7:43
SECURITY DIVISION
FALL GUNSE
FALL GUNSE

100

(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)

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.

If 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 record is filed.

Dated May 15, 2017

Signature of a member or authorized representative of a member

Jose L Perez
Typed or printed name of signee