# L16000165081

(Requestor's Name)
·
(Address)
(Address)
(10000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Codified Coning Codificator of Clabus
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•





600289958706

09/19/16--01024--025 \*\*30.00

16 SEP 19 PM 3:48

J. HARRIS

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Agent Paul Rich 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:
Paul Richard Pantoja
Agent Paul Rich
11750 NE 16th Ave # 309 Address
Miam FL 3316 City/State and Zip Code  agent, paul rich egmails (om  E-mail alldress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pau Pantoja at (786) 521-5859  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$\frac{1}{12} \\$\$ \\$\$ \\$\$ \\$\$ \\$\$ \\$\$ \\$\$ \\$\$ \\$\$ \\$

**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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Acrest Paul	Rich	ULC				
(Name of the Limited Lin (A Flo	bility Company as it no rida Limited Liability C	ow appears on our records. ompany)	)	<del></del>		
The Articles of Organization for this Limited Liabilit		ed on <u>Scotember o</u>	<u>),2-16</u> a	nd assi	gned	
This amendment is submitted to amend the following	<b>;</b> ;					
A. If amending name, enter the new name of the l	imited liability com	pany here:				
Paul Richard Panto	19 LLC					_
The new name must be distinguishable and contain the words	Limited Liability Compa	my," the designation "LLC"	or the abbreviat	ion "L.I	C."	
Enter new principal offices address, if applicable:			<u> </u>			-
(Principal office address MUST BE A STREET AD	DRESS)		<u> </u>	တ		_
				Ξį.	A 19	
			9.5	<u>ت</u>	•	-
Enter new mailing address, if applicable:			7.0	ص-	# 	
• • • • • • • • • • • • • • • • • • • •	<del></del>		ران اس		्री क कालाम्	• ,
(Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	<u> </u>	<del></del>	<u> </u>	<u>+</u> , q	- ,
	<del></del>	<del></del>	<u> </u>	<u> </u>		<u>.</u>
B. If amending the registered agent and/or re registered agent and/or the new registered office a		iress on our records,	enter the n	ame (	of the I	<u>new</u>
Name of New Registered Agent:						-
New Registered Office Address:						
		Enter Florida street address				-
		, Flor	rida			_
	City	· <del></del>	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 = Ma AMBR = Au	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Paul Richard Pantiga	11750 NE 16th Ave \$309 33161	pá <del>Add</del>
			□ Remove
		***************************************	Change
***************************************	·		🗆 Add
			□ Remove
	Ø		Change
			D Add
			Remove
			Change
		ا کہ جھا جی ا میں ا	_□ Add
		E Substantial	without the first terms of the f
		FLORIDA PLORIDA	ယ္ ြီ _D:Change ထ
			Add
			_ Remove
			_ Change
	·		_□ Add
			_□ Remove
			_ Change

	y other informati	,	9-(-) (		, <del>,, ,, ,,,</del>	4- 3-9	
	• • • • • • • • • • • • • • • • • • •	<del>,</del>					
						<del></del>	<del></del>
		<u> </u>	<del>,,,, </del>				<del></del> -
							<u></u>
						· · · · · · · · · · · · · · · · · · ·	<del> </del>
				<u>.</u>			
	,						
<del></del>							
							<del></del>
							<del></del>
<del>- 1</del>			···,				<del></del>
						·····	
							<del>_</del>
Effective date,	if other than the o	late of filing:	Septemb	ete of filing or mo	to (op	etional)	ent to 605 0207
Maria Constitution	e inserted in this blo	ck does not mee	t the applicable	statutory filing	requirements, t	his date will no	ot be listed as
<b><u><b>Note:</b></u> If the date</b>	on 4.0 DV		- 5 10001 <b>-</b> 01				
<b><u>Note:</u></b> If the date document's effection	cifies a delayed	effective dat	e, but not a	n effective ti	me, at 12:01	l a.m. on th	e earlier of
locument's effect	y after the reco	. •					
document's effect ne record spe The 90th da	ny after the reco					A	? —
document's effect	ay after the reco	<del></del>				TALLAH	19891
document's effec ne record spe The 90th da	ay after the reco	,		>	B.	TALLAHA	•
document's effec ne record spe The 90th da	ay after the reco	Signature of a mer	nber or authorize	ed representative of	f a member	ALLAHA ST.	•

Page 3 of 3

Filing Fee: \$25.00