

L16000220219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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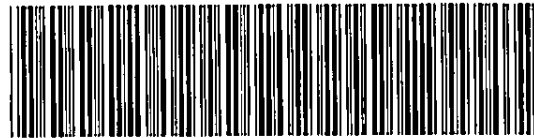
(Business Entity Name)

(Document Number)

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FALL ARIZONA COUNTY

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Everything Conch, 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:

Erika Davis
Name of Person

Firm/Company

1172 A.C. Evans Street, # B
Address

Riviera Beach, FL 33404
City/State and Zip Code

vegse10@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erika Davis at (561) 531-7718
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

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

Everything Couch, 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 December 6, 2016 and assigned Florida document number L16000220219.

This amendment is submitted to amend the following:

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

N/A

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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Erika Davis

New Registered Office Address:

1172 A.C. Evans Street, #15

Enter Florida street address

Riviera Beach

City

Florida

33404

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

MGR = Manager
AMBR = Authorized Member

☐ Change
8 NO 26
☐ Add
26
☐ Remove
M 6 3
☐ Change
3

18 NOV 26 PM 6:33
SLCUTTER
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 09-07-2001 BY 60322

18 NOV 26 PM 6:33
STATION: 1010000
CALL SIGN: 1010000
62

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.

Dated November 25, 2018.

Danzon Madison
Signature of a member or authorized representative of a member

Danzell Madison
Typed or printed name of signee