4700011013

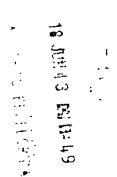
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400314036094

08/01/18--01009--018 **25.00



J LEGGETT JUN 1 4 2018

COVER LETTER

TO: Registration Se Division of Cor			
subject: <u>Ве</u>	nnett Enter	OCISES LLC ited Liability Company	
	Amendment and fee(s) are sub-	_	
Please return all correspo	indence concerning this matter	to the following:	
	Andre	Bennett Name of Person	
	 	Firm/Company	
	926 Hun	For S & Creek	dr Apt HIOI
	Deland FL	32720	
	Andre Benn E-mail address: (1	32720 City/State and Zip Code ACH 1987 © Iclo to be used for future annual report noti	ud. Com
For further information c	oncerning this matter, please ca		
Andre Be	ennett	at (386) 747 - Area Code Daytim	-7730 e Telephone Number
Enclosed is a check for the	ne 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

2018

	,	型示意 二 171
ARTICLES OF OI	RGANIZATION	1995年10
OF	7	調る国
(Name of the Limited Liability Companion (A Florida Limited Liability Companion)	v as it now appears on our records.)	PHIZ: 23
The Articles of Organization for this Limited Liability Company w	vere filed on 1-4-17	and assigned
Florida document number <u>L1700011013</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil. The new name must be distinguishable and contain the words "Limited Liability".	ADB Tre	ACMING, CCC the abbreviation L.L.C.
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	926 hunters Apt#101 Delana	Creek dr

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:			<u></u>	1	
New Registered Office Address:					
	Enter Florida street address	-v:	臣		_
	, Florida	·			
	City	Zip	Code-		
ristance to accets Cinguistics if about its Duction and tourse			•		

New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 = Au	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Christopher seneca	1617 Palm AVE Deland	Add /
		32724	Remove
A a		1117 Palm AVI Deland	□ Change
<u>AMBR</u>	Jernaine Gunn	1617 Palm AVE Deland 32724	□ Add
			☐ Remove
			Change
			🖸 Add
			Remove
			Change
		 	Remove
			Change
			🗆 Add
			□ Remove
			Change
			Remove
			Change

Andre	Bernett	100%	Owner			
						
			· <u> </u>			
						•
	·	<u> </u>		_		
•,		·	-			
				····		
						ده م
						豆
	·				ř :	
						C 3
						#7; tf
						. 7.
					74,	6 1
e date if other	than the date of fi	ling:			ه (optional)	
f the date inserted	he date must be specific f in this block does not e on the Department of	ot meer the appli	cable statutory fili	nore than 90 day ng requirement	s after filing.) Pur s. this date will	suant to 60 not be lis
ord specifies a 90th day after	delayed effective the record is file	e date, but n ed.	ot an effective	time, at 12	:01 a.m. on	the earl
May	30 2018	/ _·	<u></u> .			
Abn	dre Bennes	Mathematical and a member or aud	orized representativ	e of a member	· 	

Page 3 of 3

Filing Fee: \$25.00