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17 NOV 15 AM 7: 43 SECRETARY OF STATE ALLAHASSEE FLOSIA

COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:		GRs for OUTCLASSED LLC	,	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		MICHELLE ANTOINET	TE RIVERA	
			Name of Person	
		OUTCLASSED LLC		
OUTCLASSED LLC Firm/Company 16198 DOWING CREEK DR Address JACKSONVILLE/FL 32218 City/State and Zip Code OUTCLASSED.LLC@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MICHELLE A RIVERA 954 899-1951				
			Address	Paytime Telephone Number \$60.00 Filing Fee, Certificate of Status &
		JACKSONVILLE/FL 322	18	
			Address LE/FL 32218 City/State and Zip Code LLC@GMAIL.COM fill address: (to be used for future annual report notification) er, please call: 1.	
	-			
		E-mail address: (to be used for future annual report n	otification)
For further i	nformation co	ncerning this matter, please ca	all:	
MICHELLI	E A RIVERA			
	Name of	Person	Area Code Dayt	ime Telephone Number
Enclosed is	a check for the	e following amount:		
□ \$25.00 H	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

OUTCLASSED ILO

OUTCLASSED, LLC		
(<u>Name of the Limited</u> (2	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	•
The Articles of Organization for this Limited Lia Florida document number L17000100508	bility Company were filed on 05/05/2017	and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>(OX)</u>	
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address on our records, entice address here:	er the name of the n
Name of New Registered Agent:		AR O
New Registered Office Address:	Enter Florida street address	SSE C
	, Florida	
	City	Zip Code * - 4
New Registered Agent's Signature, if changing Re	egistered Agent:	Jan 123

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	
AMRR =	Authorized	Membe

<u>Title</u>	Name	Address	Type of Action
MGR/CO	TAMIKA LETTS	8362 PINES BLVD, SUITE 437	□ Add
		PEMBROKE PINES, FL 33024	■ Remove
			Change
MGR	SUSAN FARRAY	8362 PINES BLVD, SUITE 437	
		PEMBROKE PINES, FL 33024	Remove
			□ Change
			Remove
			Change
			□ Add
			Remove
			Change
			
		111	Remove
			□ Change
			Remove
		-no	Change

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Effective date, if other than the date of filing: Optiona Option			
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		AR (SS	5
ffectiv	e date, if other than the date of filing: (option	ial)	
Note: 1	the date inserted in this block does not meet the applicable statutory filing requirements, this d	ing.) Pursua late williono	ini t o b us.u _ž t b e J isted
locume	it's effective date on the Department of State's records.	金宝	45
		<u> </u>	-
The	rd specifies a delayed effective date, but not an effective time, at 12:01 a.i Oth day after the record is filed.	m. on the	e earlier
Dated _	OVEMBER 8 2017		
	- Malle Dan		
	Company of a manufacture of a manufactur		
	Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00