

L17000/09278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

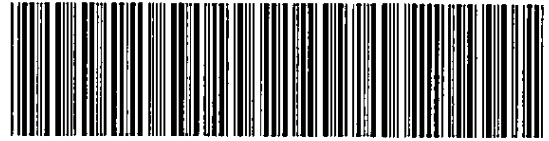
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J 8/31/17

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17 AUG 25 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Fuzdev 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:

Keith J James Jr
Name of Person

Fuzdev LLC
Firm/Company

2551 NW 16th Ct
Address

Fort Lauderdale, FL 33311
City/State and Zip Code

Keith.James@fuzllc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keith J James Jr at (954) 940-1657
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**

Fuzder, 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 May 17, 2017 and assigned Florida document number L17000109278.

This amendment is submitted to amend the following:

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

Fuz, LLC

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)

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17 AUG 25 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Keith J James Jr

New Registered Office Address:

2551 NW 16th St

Enter Florida street address

Fort Lauderdale

City

Florida

33311

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>
AMBR	Gregorio D. Sampedro	2551 NW 16th Ct	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, FL 33311	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

F. Effective date, if other than the date of filing: _____ (optional)

(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 35 USC 6207 (b) 1

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 this Department of State's records.

(b) The 90th day after the record is filed.

Dated August 28, 2017.

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Keith Jones Jr

Typed or printed name of signer _____

Page 3 of 3

Filing Fee: \$25.00

FILED
17 AUG 25 AM 9 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
1007-0207

Recipient Information

To: **Ruby**
Company: Florida Division of Corporations
Fax #: 18502456030



Sender Information

From: **Keith James**
Company: Fuz, LLC
Email address: keith.james@fuzllc.com (from 98.242.221.147)
Phone #: 9542182734
Sent on: Monday, August 28 2017 at 3:43 PM EDT

A handwritten signature in black ink, appearing to read 'Sudy', is written across the middle of the page.

RECEIVED
2017 AUG 28 PM 3:46
FLORIDA DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA