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COVER LETTER

TO: Registration S Division of Co				
TATE-LA	ALU, LLC		20	
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		A 1. 129
Please return all corresp	condence concerning this matter	to the following:		ئى ئ
	Tara Matthews			
		Name of Person		
		Firm/Company		
	8090 NW 115th Way			
		Address		
	Parkland, FL 33076			
	tara.zacharakis@gmail.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report notif	fication)	
For further information	concerning this matter, please c	all:		
Avri Ben-Hamo		561 777-5597		
Name	of Person		e Telephone Number	
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fce & 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 Addr		Street Address: Registration Sec	ction	
Registration Division of	Corporations	Division of Cor		
PO Box 63		The Centre of T		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tate-Lalu, LLC

20 KEB 14 PH 1.39 (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 7/5/2017 and assigned Florida document number E17000144275 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) 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: Avri Ben-Hamo, Esq. Name of New Registered Agent: 160 NW 4th Street New Registered Office Address: Enter Florida street address Boca Raton

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, lature 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>	Address	Type of Action
R	Tara Matthews	8090 NW 115th Way	□Add
		Parkland, FL 33076	□Remove
			= Change
MGR	Tara Matthews	8090 NW 115th Way	□ Add
		Parkland, FL 33076	□Remove
			□Change
			□Add
			□ Remove
			. OChange
			□Remove
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			П С П С П С П С П С П С П С П С П С П С
			□Change

	are afficiently Afti	icles to make both T	ara and Terry Man	news Managers of	ine LLC.	-
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			2/10/2020			
Mective	date, if other tha	an the date of filin	g:		(option	ial)
Note: If t	he date inserted in	this block does not r	meet the applicable	ate of filing or more to statutory filing re-	nan 90 days after it Quirements, this o	ling.) Pursuant to 605.0207 late will not be listed as t
document'	's effective date on	the Department of S	State's records.			
		ffective date, but no	t an effective time,	at 12:01 a.m. on th	ne earlier of: (b)	The 90th day after the
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e record sp d is filed.		- Clas	a Mat	d representative of a	member	

Filing Fee: \$25.00