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C. GOLDEN 0CT - 5 2020

COVER LETTER

TO:

	Registration Sec Division of Corp			
CHD IEC		N YOGI LLC	•	
SUBJEC	1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspor	ndence concerning this matter	to the following:	
		LOVETTE DOBSON		
			Name of Person	
		INCFILE.COM LLC		
			Firm/Company	, =
		17350 STATE HWY 249 S	STE 220	
			Address	
		HOUSTON, TX 77064		
		EFILE1234@INCFILE.CO	City/State and Zip Code	
			to be used for future annual report noti	fication)
For furth	er information co	oncerning this matter, please ca	all:	
LOVEI	TE DOBSON		855 829-9090 at ()	
	Name of	Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	e following amount:		
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN Y	OGILLC	2020 Florid PH 6:55
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our recor Liability Company)	<u>ds.</u>) :: 0. 55
The Articles of Organization for this Limited Liability Company	were filed on 07/06/2017	and assigned
Florida document number L17000145227		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	105 W FLORIBRASKA AVE	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL 33603	
Enter new mailing address, if applicable:	PO BOX 172428	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	TAMPA, FL 33672	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>ente</u>	r the name of the new registere
New Registered Office Address:		
	Enter Florida street addre	iss
		lorida
	City	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>	Address	Type of Action
			□Add
		 -	□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove
			□Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□Change

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		 	 -
Effective date, if other than the fan effective date is listed, the date many Mote: If the date inserted in this bedocument's effective date on the I	st be specific and cannot be prior lock does not meet the application.	able statutory filing require	(optional) 00 days after filing.) Pursuant to 605.02 ements, this date will not be listed
record specifies a delayed effecti	e date, but not an effective ti	me, at 12:01 a.m. on the ea	rlier of: (b) The 90th day after th
rd is filed.			
rd is filed. AUGUST 5	2020		
AUGUST 5	, <u>2020</u>		
AUGUST 5	Justinan Signature of a member or author		