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(R	Requestor's Name)	
A)	address)	
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COVER LETTER

SUBJECT: 3'N'Less L					
	Name of Lin	lited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Erika Rodriguez, Esq.				
		Name of Person	·		
	Posada Taddeo Dietiker				
		Firm/Company			
	3111 N University Drive, Suite 720				
		Address			
	Coral Springs, FL 33065				
		City/State and Zip Code			
	RegisteredAgent@ptd.law				
	E-mail address: (to be used for future annual report notific	ation)		
For further information of	concerning this matter, please co	all:			
Erika Rodriguez		561 271-3787 at ()			
Name of Person		Area Code Daytime	Telephone Number		
Enclosed is a check for t	he 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:

TO:

Registration Section Division of Corporations

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

3'N'LESS LLC				
(Name of the Limite	d Liability Comp. A Florida Limited	any as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Lia Florida document number L17000156272	ability Company	were filed on JULY 21,	2017	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	pility company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabi	ility Company," the designation	on "LLC" or the abbreyi	ation; J.,L.C."
Enter new principal offices address, if applica	ffice address MUST BE A STREET ADDRESS) 5344 University Dr Lauderhill, FL 33351		0	
• •		5344 University Dr	5.2	- CC -1
		Lauderhill, FL 33351		2
Enter new mailing address, if applicable:		3'N'Less LLC		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	5344 University Dr	运	32
Mading quaress MAT BE A FOST OFFICE BOX)		Lauderhill, FL 33351		
B. If amending the registered agent and/or registered agent and/or the new registered off Name of New Registered Agent: New Registered Office Address:	Posada Taddeo	<u>re</u> :		name of the r
	Coul Springs	thier Purtuu Mreet		
	Coral Springs	City	Florida <u>33065</u> 	ip Code
New Registered Agent's Signature, if changing Re	egistered Agent:	•		,
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this c	r and complete tered agent as _l egistered office	performance of my dut	ies, and I am famil	iar with and

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of/3

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>	Type of Action
MGR ME	Lis-Ann L Lee-Mowatt	1140 Sussex Dr Apr 1402	
		North Lauderdale, FL 33068	☐ Remove
			Change
MBR	Dameon H. Johnson	8875 Ramblewood Dr. 2014	
		Coral Springs, FL 33071	□ Remove
			■ Change
			
			□ Remove
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ote: If t	the date inser	d, the date must be ted in this block	c does not mee	t the applicab	date of filing or a le statutory fili	more than 90 day ng requiremen	s after filing. ts, this date) Pursuant to- will not be l	605.02 listed a
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Page 3 of 3

Filing Fee: \$25.00