## L17000157795

(Re	questor's Name)	
(Ad	dress)	<del>-</del> - , - <del>-</del>
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	





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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
Small b2b	Solutions		
SUBJECT:	Name of Lim	ited 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:	
	Robert Calhoun		
		Name of Person	
	Small b2b Solutions		
		Firm/Company	
	11523 sw 53 pl		
		Address	<del></del>
	Cooper City, FL 33330		
		City/State and Zip Code	
	Robert@smallb2b.com	to be used for future annual report not	ification)
For further information c	concerning this matter, please co	•	meanony
Robert Calhuon		786 228-9926 at ()	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	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 Addres		Street Address:	
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632	_	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro Tallahassee, FI	be Street, Suite 810 L 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	any as it new appears on our recor Liability Company)	<u>rds.</u> )
The Articles of Organization for this Limited Liability Company Florida document number L17000157795	were filed on <u>7/24/17</u>	and assigned
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 "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2920
(Principal office address MUST BE A STREET ADDRESS)		
		THE STATE OF THE S
		%c p M
Enter new mailing address, if applicable:	11523 sw 53 pl	me P
(Mailing address MAY BE A POST OFFICE BOX)	Cooper City, FL 33330	
		m +
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, ente	
	, F	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	-
I hereby accept the appointment as registered agent and agr		further agree to comply with
provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	performance of my duties, o	and I am familiar with and

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
MGR	Maikel Alfonso	11523 sw 53 pl	<b>=</b> Add
		Cooper City, FL 33330	□Remove
			Change
			□Add
			□ Remove
			Change
			□Remove
			Change
			ZDAdd  CO PH Change
			PH Change O4
			□Remove
			□Add
			□ Remove
			□ Change

<del></del>
[ ]
See P II
TO O
<del></del>
9/30/20  (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 605.0207 ( Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records.
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed.
Dated September 39, 2000
Signature of a member or authorized representative of a member
Robert Calhorn  Typed or printed name of signee