Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000261190 3)))



H200002811903ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : 120100000009

Phone : (305)599-0839 Fax Number : (305)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AL IP SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help ALC: ALT: VEE

AUG TO ZEED

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AL IP SERVICES, LLC (Name of the Limited Liability Company as it the appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 09/21/2017 Florida document number L17000195962 This amendment is submitted to amend the following: A. If amonding 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 Enter new principal offices address, if applicable: 7746 NW 64TH STREET (Principal office address MUST BE A STREET ADDRESS) **MIAMI FL 33166** Enter new mailing address, if applicable: 7746 NW 64TH STREET (Mailing address MAY BE A POST OFFICE BOX) MIAMI FL 33166 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: TOMAS VIDAL Name of New Registered Agent: 7746 NW 64TH STREET New Registered Office Address: Enter Florida street address MIAMI Florida <u><sup>33166</sup></u> New Registered Agent's Signature, if changing Registered Agent:

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 Hability

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

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> P	Name ANGEL CASTELLANOS	Address	Type of Action
	CAB CAB ALLANOS	2395 SW 2ND ST	□Add
AMBR		MIAMI FL 33135	■Remove
	TOMAS VIDAL		□ Change
		7746 NW 64TH STRBET	<b>=</b> Add
		MIAMI FL 33166	П. Стюче
			□ Change
			□Add
			□Remove
			□Change
			□Add
•	· 		☐ Remove
			DAdd
			□Remove
			Change
			CJAdd
			□ Remove
			— □Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
-	
-	
-	
-	
~	
-	
-	
-	
Effective If an effect Note: If document	e date, if other than the date of filing:  ive 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 (3)(6) is effective date on the Department of State's records.
d is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated _	gust 3 2020
<u></u>	
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member  ANGEL CASTRLLANOS