

L17000204965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

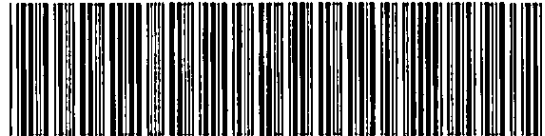
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900307907049

01/22/18--01019--005 \*\*25.00

FILED

2018 JAN 22 P 2:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D SCOTT

JAN 23 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LXZ TECHNOLOGIES, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lenzer Burton

\_\_\_\_\_  
Name of Person

LXZ Technologies, LLC

\_\_\_\_\_  
Firm/Company

7648 Topiary Ave

\_\_\_\_\_  
Address

Boynton Beach, FL 33437

\_\_\_\_\_  
City/State and Zip Code

tonsie70@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lenzer Burton

\_\_\_\_\_  
Name of Person

504  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code

616-0446

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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:**

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

FILED  
2018 JAN 22 P 2:05  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

LXZ Technologies

(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 10-5-17 and assigned  
Florida document number L17000204965.

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:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

*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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Ronnelle Buch	6710 Congress Avenue, APT 101	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33487	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Charlotte Feinstein	1155 NW 18th Avenue	<input checked="" type="checkbox"/> Add
		Delray Beach, FL 33445	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Timothy Joyner	614 NW 24th Avenue	<input checked="" type="checkbox"/> Add
		Boynton Beach, FL 33426	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
 2018 JAN 22 PM 02:05  
 TALLAHASSEE, FLORIDA

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

This image shows a single page of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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 6050207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated January, 2018

29th

Signature of a member or authorized representative of a member

Lenzer Burton

Typed or printed name of signee

FILED  
2018 JAN 22 PM 2:05  
CLERK OF DISTRICT COURT  
JAN 22 2018  
AMERICAN BAR ASSOCIATION