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COVER LETTER

TO:

TO: Registration Se Division of Cor						
Newsman S	Sales LLC		•			
SUBJECT: Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.				
Please return all correspo	ondence concerning this matter	to the following:				
	Anthony A. Gervasi Jr.					
		Name of Person	<u> </u>			
		Firm/Company				
	204 S. Seacrest Circle					
		Address				
	Delray Beach, FL 33444					
	tony@bigtsdeli.com	City/State and Zip Code				
	· - -	to be used for future annual report no	otification)			
For further information c	oncerning this matter, please c	all:				
Anthony Gervasi		609 915-1982 at ()				
Name of Person		Area Code Dayt	ime 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 Address: Registration Section		Street Address: Registration S	Section			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Newsman Sa	les LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited I.	is as it now appears on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 17006206</u> 09			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili			
Enter new principal offices address, if applicable:	814 E ATLANTIC AUS		
(Principal office address MUST BE A STREET ADDRESS)	814 E ATLANTIC AUR Del RAY BEJEH, FL 35183		
Enter new mailing address, if applicable:	204 S SCACREST CIR Delmy Beach, FC 33444		
(Mailing address MAY BE A POST OFFICE BOX)	Delly Beach, FC 33444		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new register		
Name of New Registered Agent: ANTI	They A GERVAST TR		
New Registered Office Address: 204 5	204 5 SeA cre st CIR Enter Florida street address		
De (RA	Y BeACH Florida 33444 Zip Code		
	City Zip Code		
New Degistered Agent's Signature if changing Degistered Agents			

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>	Type of Action
MGR	Daniel Newman	8741 Sandy Crest Lane	⊡Add
		Boynton Beach, FL 33473	=Remove
			□Change
MGR	Anthony Gervasi	204 S. Seacrest Circle	■Add
		Delray Beach, FL 33444	□Remove
MGR	Michael Gervasi	204 S. Seacrest Circle	≣ Add
		Delray Beach, FL 33444	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		<u> </u>	□Remove
			□Change

Signature of a member of authorized representative of a member AN Hom A GENVAZE To Typed or printed name of signee