

Office Use Only



300318666813

09/24/18--01042--009 **25.09

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Divi	sion of Corp	oorations	-				
SUBJECT:	FERGUWIT	TZ INVESTMENTS, LLC					
SUBJECT		Name of Limited Liability Company					
The enclosed	Articles of /	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspor	ndence concerning this matter	to the following:				
		MARIO FERGUSON					
			Name of Person	<u>-</u>		, -	
		FERGUWITZ INVESTM	ENTS, LLC			•	
			Firm/Company				
Name of Person FERGUWITZ INVESTMENTS, LLC Firm/Company 26122 SW 133 PLACE Address MIAMI, FL 33032 City/State and Zip Code INFO@FERGUWITZINVESTMENTS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:						-	
Firm/Company 26122 SW 133 PLACE Address MIAMI, FL 33032 City/State and Zip Code INFO@FERGUWITZINVESTMENTS.COM E-mail address: (to be used for future annual report notification)						~	
		MIAMI, FL 33032				ഇ	
		_	ESTMENTS.COM				
		E-mail address: (to be used for future annual	report notificat	tion)		
For further in	formation co	oncerning this matter, please co	all:				
MARIO FER	RGUSON		786 200 at ()	0-4132			
_	Name of	Person	Area Code	Daytime Te	elephone Number		
Enclosed is a	check for the	e following amount:					
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc		Certified C	of Status &	
	Registra	NG ADDRESS: ntion Section n of Corporations ox 6327	Registrat	ion Section of Corporation	ADDRESS:		

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our record	<u> </u>
mited Liability Company)	<u></u> ,
npany were filed on 01/01/2018	and assigned
d liability company here:	
I Liability Company," the designation "LLC	or the abbreviation "L.L.C."
	,
<u>SS)</u>	<u>:</u>
	
	
 -	
red office address on our records s <u>s here</u> :	, enter the name of the
Enter Florida street addres:	<u>, , , , , , , , , , , , , , , , , , , </u>
, Flo	orida Zip Code
-	I Liability company here: I Liability Company," the designation "LLC" (SS) red office address on our records shere: Enter Florida street address:

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
P	MARIO FERGUSON	26122 SW 133 PL MIAMI, FL 33032	
			_ ■ Remove
			Change
MGR	MARIO FERGUSON	26122 SW 133 PL MIAMI, FL 33032	= Add
			☐ Remove
			Change
MGR	RANDALL FERGUSON	1405 CYPRESS POINT, # 102 ROCK HILL, SC 29730	
			■ Remove
			□ Change
AMBR	ROCHELLE FERGUSON	26122 SW 133 PL MIAMI, FL 33032	■ Add
			□ Remove
			☐ Change
			Add
			Remove
			Change
			□ Add
			Remove
			Change

		<u> </u>	
			
		<u> </u>	
			
			
		· · · · · · · · · · · · · · · · · · ·	
			
			
		<u> </u>	
ective date, if other than the dat	e of filing:	(optional)	
reffective date is listed, the date must be:	specific and cannot be prior to date of does not meet the applicable stat	filing or more than 90 days after tiling.) Pursuantory filing requirements, this date will not	nt to 605.020 t be fisted as
record specifies a delayed ef The 90th day after the record	fective date, but not an ef is filed.	fective time, at 12:01 a.m. on the	earlier o
SEPTEMBER 19	2018		
	nop		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00