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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS CHOICE, INC.

Account Number : I20010000004 Phone : (954)782-1829 Fax Number : (954)697-0245

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 SAMPLE A-5, LLC

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Electronic Filing Menu Corporate Filing Menu

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

SAMPLE A-5, LUC

SAMPLE A-5, LLC.	d Liability Company as it now appears of A Florida Limited Liability Company)	n out records.)	
	A Florida Limited Liability Company)		
The Articles of Organization for this Limited Li Florida document number L180(x)030952	ability Company were filed on 020:	5/2018	and assigned
This amendment is submitted to amend the follo			
A. If amending name, enter the new name of	the limited liability company here	;	
The new mane must be distinguishable and commit the w	ords "Limited Liability Company," the desi	gnution "LLC" or the abl	neviation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE			
Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE			
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our re- ess here:	cords, <u>enter the nan</u>	e of the new registers
Name of New Registered Agent:	CAROLA BEEN		
New Registered Office Address:	411 NORTH NEW RIVER DRIVE	E EAST, UNIT #1805,	<u> </u>
1943 1940 1943 1943 1943 1943 1943 1943 1943 1943	Enter Flori FT. I. AUDERDALE	da sweet address 71 71 71 71 71 71 71 71 71 71 71 71 71	130 K
	Cip		Typ 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 accent 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 oddress. 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
			□ Remove
			□Change
			□Remove
			Change
			□Remove
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			Change
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			□Remove
			□Add
			□Remove
			Change

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Morar - Highe date inserted i	tan the date of filing:
	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
e record specifies a delayed ed is filled.	CHECKIVE Care. But not on viceous and
Dictord _Fortlanderdala	
APPENDENCE AND APPEND	Signature of a member or authorized representative of a member
CAROLA BEE	EN
-11 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	Typed or printed name of signee