## L18 0000 54888

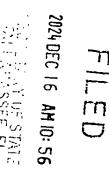
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500441135175

12/18/24--01012--005 \*\*25.00



Jenniffer Tarantino 803.412.6010 5502 Pebble Beach Dr Lakeland, F1 33812

## **COVER LETTER**

&: sed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Compan Florida document number \( \begin{array}{c} \lambda \) \( \begin{array}{c} \lambda \\ \b	y were filed on 3/1/2018 of assigned T
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5502 Pubble Beach Dr Lakeland, FL 33812
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5502 Pebble Beach Dr Laneland, Fl 33812
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:  New Registered Office Address:  Lakel	Pebble Beach Or  Enter Florida street address  And Florida F1 33812  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>	Name	Address	Type of Action
MGR	Jason M Tarantini	o 5502 Pebbla Beach (	OC [] Add
		Lakeland, F1 33812	Remove
			[]Change
			🖸 Add
			□ Remove
			□Change
			□Add
			□Remove
		<del> </del>	□Change
			🗆 Add
			□Remove
		<del></del>	□Change
<del></del>			□Add
			🖸 Remove
			□Change
<del></del>			□Add
			□Remove
			Change

re date, if other than the date of filing:
ctive 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 605.020 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
nt's effective date on the Department of State's records.
specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d.
·
$\gamma$
Signature of a member-or authorized representative of a member
i i