## 118000076548

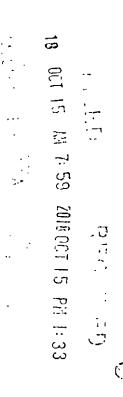
(Re	questor's Name)	<del>.</del>
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

SUBJECT:	EMBODY BOWN	-S LLC	
	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Name of Person	
		W 70	
		Firm/Company	
		Address	
		Maniess	
		City/State and Zip Code	
		on primate and say, code	
		to be used for future annual report noti	fication)
For further information of	concerning this matter, please ca	all:	
		at () Area Code Daytim	e Telephone Number
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	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:

TO:

Registration Section Division of Corporations

> 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 3/27/18	_ and assigned
Florida document number <u>L18000076548</u> .	, ,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:	10278 NW 51 ST TO	ER RACE
(Principal office address MUST BE A STREET ADDRESS)	DOPAL, FL 33178	
		<u> </u>
Enter new mailing address, if applicable:	SAME AS ABOVE	9
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ie name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<del></del>	, Florida	Zip Code
	City	ziji Code

Vew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany 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
AMBL	DAVID REYES	HOLEY, FL 33166	
MAIDE			Kemove
			Change
AMBL	SUPER FISH SEAFOOD CORP	HOINW 77TH TERR MEDLEY FL 33166	
			<b>⊠</b> Remove
			Change
			D Add
		<del></del>	☐ Remove
			Change
<del></del>	<del></del>		🗆 Add
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			□ Change
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			□ Remove
			Change
			Remove
			Change

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	59
ctive date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or met. If the date inserted in this block does not meet the applicable statutory filin ament's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective the 90th day after the record is filed.	ime, at 12:01 a.m. on the earli
ed_ WEDNESDAY OCT 3. 2018	

Page 3 of 3

Filing Fee: \$25.00