

L180000 80532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

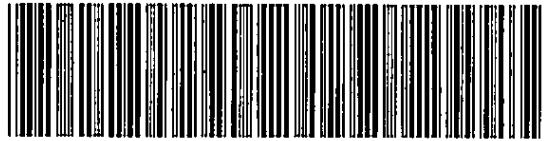
(Business Entity Name)

(Document Number)

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2018 APR 27 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B FIGUEROA

MAY 03 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2018

JEISY FERREIRA
5353 HAWKS LANDING DR
#6-101
FORT MYERS, FL 33907

SUBJECT: DELUXX CONGLOMERATE, LLC
Ref. Number: L18000080532

We have received your document for DELUXX CONGLOMERATE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 818A00008014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Deluxx Conglomerate LLC
Name of Limited Liability Company

DEPARTMENT OF
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

2018 APR 27 PM 1:28

RECEIVED

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeisy Ferreira
Name of Person
Deluxx Conglomerate LLC
Firm/Company
5353 Hawks landing Dr. #6-101
Address
Fort Myers, FL 33907
City/State and Zip Code
deluxxcgl@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeisy Ferreira at (239) 895-6339
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee.
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|--|

MAILING ADDRESS:

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**

Deluxe Conglomerate LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/29/2018 and assigned Florida document number L18000080532

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Jeisy Ferreira

New Registered Office Address:

5353 Hawks Landing Dr. #6-101
Enter Florida street address

Fort Myers

Florida

33907
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

Title	Name	Address	Type of Action
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AMBR	Ernesto E. Angeles	5353 Hawks landing Dr. Apt 6-101 Fort Myers FL 33907	<input type="checkbox"/> Add <input type="checkbox"/> Remove
------	--------------------	---	---

AMBR	Jeisy Ferreira (P)		<input type="checkbox"/> Change <input type="checkbox"/> Add
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AMBR	Jeisy Mercedes Ferreira	5353 Hawks landing Dr. #6-101 Fort Myers FL 33907	<input type="checkbox"/> Add <input type="checkbox"/> Remove
------	----------------------------	--	---

		(Add middle name or/and initial)	<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove
--	--	----------------------------------	--

			<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Change
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove <input type="checkbox"/> Change
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SILVER HAWK OF STATE
ALLIANCE FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please add Middle initial to "Ernesto"
and middle name to "Jeisy" as listed
on page 2.

Thanks!

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2010 APR 27 PM 4:55
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

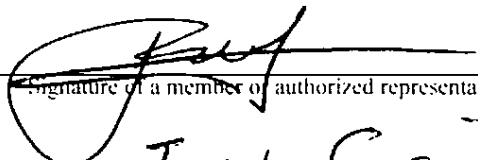
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _____



Signature of a member or authorized representative of a member
Jeisy Ferreira

Typed or printed name of signer