

L18000092833

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

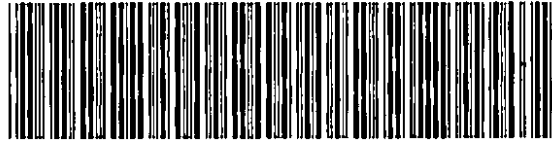
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2020 OCT 23 PM 4:57
TALLAHASSEE, FL 32301

FILED

OCT 23 2020

Registration Section
Division of Corporations

SUBJECT: _____
Name of Limited Liability Company

ase return all correspondence concerning this matter to the following:

Name of Person

Firm/Company

Address

City/State and Zip Code _____

E-mail address: (to be used for future annual report notification)

further information concerning this matter, please call:

ik Lichter 305 894-6750

Name of Person at () Area Code Daytime Telephone Number

enclosed is a check for the 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:

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**

FILED

2020 OCT 23 PM 4:57

CLERK OF THE CIRCUIT COURT
TALLAHASSEE, FLORIDA

Bianca O'Donnell, LLC

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

Articles of Organization for this Limited Liability Company were filed on April 12, 2018 and assigned
Florida document number L18000092833.

As amendment is submitted to amend the following:

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

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

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:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

By 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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

GR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GR	Teresa Bone	2555 Collins Ave, Suite 1001	<input type="checkbox"/> Add
		Miami Beach, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
GR	Bianca O'Donnell	18930 SE 23 Place	<input type="checkbox"/> Add
		Morrison FL 32668	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 01-23-2008 BY 60322
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If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED

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.

he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The 90th day after the record is filed.

OCTOBER 15

2020

Dated

~~Signature of a member or authorized representative of a member~~

~~BIANCA O'DONNELL.~~

Typed or printed name of signee