## 418000094446

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## **COVER LETTER**

	gistration Sec vision of Corp					
CUBLICT	Lech, LLC				•	
SUBJECT		Name of Lim	ited Liability Company			
The analog	od Amiolac of	Amendment and fee(s) are sub	mitted for filing			
Please retur	п ан соггезрог	ndence concerning this matter	to the following.			
		James P Larweth				
			Name of Person	···	·	
		Lech, LLC				
			Firm/Company			
		5441 Marleon Drive				
			Address	<del>-</del>	-	
		Windermere, FL 34786				
			City/State and Zip Code			
		pam.aman@prooostllc.com		<del></del>		
For further	information co	E-mail address: ( oncerning this matter, please c	to be used for future annual all:	report notification)		
Pam Aman		, , , , , , , , , , , , , , , , , , ,		2-3116		
	Name of	Person	at () Area Code	Daytime Telepho	one Number	2021
Enclosed is	a check for th	e following amount:				JUN 21
<b>\$25.00</b>	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy tadditional copy is enc		\$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is e	at <u>us</u> &
	ailing Address		Street Ac			
	egistration S ivision of C		Registration Section Division of Corporations			
	O. Box 632	-	The Ce	ntre of Tallahas	ssee	
Ta	allahassee, F	FL 32314	2415 N	. Monroe Stree	t, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Lech, LLC		
(Name of the Lim	ited Liability Company as it now appears on our rec (A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited I Florida document number L18000094446		and assigned
This amendment is submitted to amend the fol	lowing:	
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 "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
	<del></del>	-
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/or		ter the name of the new registere
agent and/or the new registered office addr	ess nere:	<b>9</b>
Name of New Registered Agent:	KLF Management Services	2021
New Registered Office Address:	301 N. Fernereek Avenue, Suite C	
	Enter Florida street address	
		Florida 32803 > 1
	City	Zip-Code
New Registered Agent's Signature, if changing	Registered Agent:	24

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 Adum O. KJrwan, Manager

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
MGR	Prooost, LLC	5441 Marleon Drive	□Add
		Windermere, FL 34786	=Remove
			□Change
MGR	James P Larweth	5441 Marleon Drive	<b>=</b> Add
		Windermere, FL 34786	□Remove
			□Change
			□ Add
			□Remove
			DbAd <u>E</u>
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ective date, if other than the effective date is listed, the date mete: If the date inserted in this lument's effective date on the	ast be specific and cannot be block does not meet the ap	oplicable statutory	or more than 90 d filing requireme	_(optional) ays after tiling, nts, this date	) Pursuant to 605 will not be liste	.020 ed a
cord specifies a delayed effect s filed.	ve date, but not an effecti	ve time, at 12:01	a.m. on the earlie	erof:(b) Th	e 90th day afte	r the
June I	2021					
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Filing Fee: \$25.00