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(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	-
(Business Entity Name)	_
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08/29/19--01017--005 **25.00

COVER LETTER

TO:	Registration Sec Division of Corp			
(71.14%	E # 2 2/3/23	L HOLDINGS LLC		
SUB	JECI:	Name of Limi	ited Liability Company	
The	enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Pleas	se return all correspor	dence concerning this matter	to the following:	
		COLLEEN RAMIREZ		
			Name of Person	
			FimyCompany	
		789 N FERDON BLVD.		
			Address	
		CRESTVIEW, FL 32536		
		C.KELLY0873@GMAIL.C	City/State and Zip Code 'OM	
		E-mail address: ()	to be used for future annual report notif	ication)
For I	urther information co	ncerning this matter, please co	ıll:	
COI	The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: COLLEEN RAMIREZ Name of Person Firm/Company 789 N FERDON BLVD. Address CRESTVIEW, FL 32536 City/State and Zip Code C.KELLY0873@GMAHCOM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: COLLEEN RAMIREZ Name of Person Daytime Telephone Number Enclosed is a check for the following amount:			
	Name of	Person		: Telephone Number
Encl	osed is a check for the	e following amount:		
	325.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

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

as it now appears on our records.) ility Company)	
re filed on 04/09/2018	and assigned
v company here:	
Company," the designation "LLC" or	the abbreviation "L.L.C."
	2 23
	PH 2: 1
e address on our records. <u>e</u>	enter the name of the ne
Enter Florida street address	
Floric	la
	e address on our records. Enter Florida street address Florida

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>	<u>Name</u>	Address	Type of Action
MBR	JOSE RAMIREZ-AVINA	789 N. FERDON BLVD.	
		CRESTVIEW, FL 32536	
			□ Remove
			■ Change
			☐ Remove
			☐ Change
			🗀 Add
			Remove
			☐ Change
			□ Remove
			Change
			Remove
			Change
			Add
			☐ Remove
			□ Change

Effective date, if other than the date of filing: (Uptional) If an effective date is listed, the date must be specific and cannot be paior to date of filing or more than 90 days after filing.) Pursuant to 005.0207 (Note: If the date inserted in this block dues not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records. The 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. Dated Output Signature of a member or authorized representative of a release. COLLEEN KELLY-RAMIREZ	_	
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Signature of a member or authorized representative of a member		
	Dated	aug 29 . 2019.
COLUMN FILLY DAMIDEZ		Signature of a member or authorized representative of a member
CONTRACT VALUE VAL		

Page 3 of 3

Filing Fee: \$25.00