# L18000102703





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11/07/19--01012--015 \*\*25.00

Amend

DEC 07 2019 I ALBRITTON

## **COVER LETTER** FULX COLLECTIVE LLC

Registration Section
Division of Corporations TO:

Flux Colle SUBJECT:	ctive LLC		
	Name of Lim	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Eddie Seymour		
		Name of Person	<del></del>
	Flux Collective LLC		
		Firm/Company	
	1160 NW North River Dr.,	• •	
		Address	
	Miami, FL 33136		
	ed.seymour11@gmail.com	City/State and Zip Code	<del></del>
	E-mail address: (	to be used for future annual report notifi	cation)
For further information	concerning this matter, please co	all:	
Eddie Seymour		561 531-0131 at ()	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Flux Collective LLC		
( <u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 04/24/2018	and assigned
Florida document number L18000102703	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
		• ,
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or regi	<del>-</del>	enter the name of the n
egistered agent and/or the new registered office ad	<u>dress here</u> :	<u>.</u>
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
<del></del>	City	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Eddie Seymour	1160 NW NORTH RIVER DR. APT. 16 MIAMI, FL 33136	Add
			□ Remove
			■ Change
AMBR	AAXIS ARCHITECTAL SERVICES, INC	9021 RIDGELAND DR CUTLER BAY, FL 33157	
			Remove
			Change
AMBR	GONZALEZ & ASSOCIATES ARCHITECTURE LLC	110 PINE AVE MIAMI SPRINGS, FL 33166	
			☐ Remove
			Change
MGR	ALLEN VANDERSLUIS	9021 RIDGELAND DR CUTLER BAY, FL 33157	Add
			Remove
			Change
MGR	EDGAR GONZALEZ	110 PINE AVE MIAMI SPRINGS, FL 33166	Add
			□ Remove
			Change
			CI Remove
			□ Change

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te: If the	ate, if other than the date date is listed, the date must be see date inserted in this block of effective date on the Depart	does not meet the applic	to date of filing or mable statutory filin	ore than 90 days after filing g requirements, this date	.) Pursuant to 605.020 will not be listed a
record he 90t	specifies a delayed eff h day after the record	fective date, but no is filed.	t an effective t	ime, at 12:01 a.m.	on the earlier o
cd	31st of October	. 2019	/		<b>.</b>
	Sign		Ly	420/	,
					· ·

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Filing Fee: \$25.00