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		. <u>.</u>
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

SUBJECT: Optin	num Buyers	LL(
	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Ariel Herne	on Le Z JR Name of Person	
	Oftimum Bu	JY 05 5 L L C Firm/Company	
	7617 Brand	y Wood Cir Unit	- 164
	Winter Paci	K, FL 32792 City/State and Zip Code	
	~	o be used for future annual report notifi	cation)
For further information co	neerning this matter, please ca	all:	
Ariel Hern Name of	and ez JR	at (<u>954</u>) <u>2 94</u> Area Code Daytime	9 0 94 Telephone Number
Enclosed is a check for the	e 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:

TO:

Registration Section Division of Corporations

> 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

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>	Name	Address	Type of Action
			D Add
			□ Remove
			Change
			Add
			☐ Remove ·
			☐ Change
		<u> </u>	Add
			□Remove
		☐ Change	
			
			☐ Change
			Remove
		Change	
			□ Add
			□ Remove
			☐ Change

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OPTIMUM BUYERS (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $82-5428506$	y were filed on $05/07/2018$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	7617 Brandy Wood Cir Unit 164 Winter Park, FL 32792
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7617 Brandywood Cir Unit 164 Winter Park, FL 32792
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	
Name of New Registered Agent:	5 1.
New Registered Office Address:	Enter Florida street address
	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

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ffective date, if other than the date of an effective date is listed, the date must be spaced at this block do ocument's effective date on the Departm	es not meet the applic	able statutory filing	(option ore than 90 days after fig requirements, this o	nal) ling.) Pursuant to 605.0207 late will not be listed as
e record specifies a delayed effe The 90th day after the record is		ot an effective ti	me, at 12:01 a.	m. on the earlier of
ratedSignat	ure of a member or auth	orized representative	of a member	
4	ſ	JR ed name of signee		

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Filing Fee: \$25.00