L1800034278

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600314730066

07/16/18--01033--007 **85.00

2019 FEB 26 PM 1: 2

B. BRUCE FEB 26 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2018

WYNNE LEE-NUNEZ 100 S DIXIE HWY, SUITE 303 WEST PALM BEACH, FL 33401

SUBJECT: ANUCAN LLC Ref. Number: L18000124278

We have received your document for ANUCAN LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Corporate Records Supervisor

Letter Number: 218A00015234

2019 FEB 26 PM 1: 25

COVER LETTER

Registration Section
Division of Corporations

го:

SUBJECT:		(AN LLC			
	Haine of Little	ned Elabinty Company			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	Leo	Name of Person	k		
		ANUCAN Firm/Company			
	1500		DR.	2019 FE	
	W.P.B	Address FL 3340C City/State and Zip Code pala Wycho to be used for future amoual report notifi	<u> </u>	8 26 PH	
	E-mail address: (o befused for future annual report notif	ication)	1: 29 514.5 1.08114	p+ 4*
For further information con	cerning this matter, please ca	all:		•	
Leonel PA	latnik Person	at (561) 786 Area Code Daytime	ZSZ. S	628	
Enclosed is a check for the		·	·		
= \$25.00 Filing Fee August Surprise Au	Sand Filing Fee & Certificate of Status bm, Hed 2018	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
MAILIN Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations	STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer	n ations		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were file Florida document number <u>L18061747</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability com	
	<u>npany here</u> :
A. If amending name, enter the new name of the limited liability com	npany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	nany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Uest PAIM Beach, FL 33400
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1506 The fointe Dr. West Palm Beach, Fl 33409
B. If amending the registered agent and/or registered office address here:	Idress on our records, enter the name of the new
Name of New Registered Agent:	SS 26 1
New Registered Office Address:	Enter Florida street address
City	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to ac provisions of all statutes relative to the proper and complete perform accept the obligations of my position as registered agent as provided being filed to merely reflect a change in the registered office address company has been notified in writing of this change.	mance of my duties, and I am familiar with and defect of the document is

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added_r removed from our records</u>:

AGR = Manager

AMBR = Authorized Member

<u>l'itle</u>	<u>Name</u>	Address	Type of Action
1GR	LEE-NUNEZ WYNNES	1779 SW DYER Point DR Pplm City, FL 334990	
		Pplm (ity, FL 334990	KRemove
			Change
			Add
			Remove
		<u> </u>	🗆 Change
			Add
			Remove
		<u></u> ≥~.	Change
		<u></u>	Padd 20 Page 10 Page 1
			L CHIOTC , y
		G	Change
			O Add
			□ Remove
			Change
			□ Add
			Remove
			_□ Change

• <u>.</u> i						
		<u> </u>				
_			 -			
_						
-		 				
			<u> </u>			
						
		• •		•		
					2019	
	·				9 FEB	Ï
_			 .			
_						n
					70	, •
_					29	
		. ——				
_	- · · · · · · · · · · · · · · · · · · ·			-		
ffectiv	e date, if other than the d	late of filing:		(opti	ional)	
Note: I	ctive date is listed, the date must f the date inserted in this bloom t's effective date on the Dep	ck does not meet the a	ipplicable statutory f			
e reco	ord specifies a delayed 90th day after the reco	effective date, burd is filed.	it not an effectiv	e time, at 12:01	a.m. on the earlie	r of:
Dated _		7.07	190			
	S	ignature of a member or	authorized representati	ive of a member		
		. D. S. C. C. W. INCHIDE! OF	rel PA			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00