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## **COVER LETTER**

TO:				
SUBJEC	CT:	ricles of Amendment and fee(s) are submitted for filing.    correspondence concerning this matter to the following:    Firka Mondal   Name of Person   Mar Revenue   Name of Person   Mar Revenue   Name of Person   Nature   Name of Person   Name		
			_	
Please re	turn all correspoi	idence concerning this matter	to the following:	
		Erika	Morola	S
		Marki	erroah Firm/Company	LLC
		(2622	Shorelin	ne Or
		welling	ton FL	33414
		Ü	City/State and Zip Code	
		Name of Limited Liability Company  ed Articles of Amendment and fee(s) are submitted for filing.  In all correspondence concerning this matter to the following:  FIRE MONUS  Name of Person  Margier Och  Firm/Company  12622 Shoveline Or  Address  Welling for Fee 33414  City/State and Zip Code  Firmil 3ddress: (to be used for future annual report notification)  information concerning this matter, please call:  IKA MONUS  Name of Person  Area Code  Daytime Telephone Number		
For furth	er information co	ncerning this matter, please ca	dl:	
E	81Ka	Mondes	at (561) 3	19 21 30
	Name of	Person	Area Code	Daytime Telephone Number
Enclosed	l is a check for the	e following amount:		
<b>X</b> () \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status		

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certified Copy (additional copy is enclosed)

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

(additional copy is enclosed)

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

**OF** The Articles of Organization for this Limited Liability Company were filed on and assigned 1800012 Florida document number This amendment is submitted to amend the following: 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 "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

hanging Registored Agent, Signature of New Registered Agent

Florida

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

	AGR = Manager AMBR = Authorized Member				
<u>Title</u>	Name		Address		Type of Action
M62	Erika	Monde	1 12622 Shovel Wellington	ine O1	□ Add
			wellinghin	33414	Remove
					🗆 Change
MGR	- Janeth Hortedo		12622 Shore	line Dr	<b>A</b> Add
	trutedo	-	12622 Shore Wellington	33414	Remove
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li ffact	ive date, if other than the date of filing: 7 - 2 - 18 (optional)	
lf an ef <u>Note:</u>	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list tent's effective date on the Department of State's records.	6.0207 (3)(b) ed as the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	er of:
Dated	July 1st 2018	
	Signature of a member or authorized representative of a member	
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	laneth Hurtado.	

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Filing Fee: \$25.00