

2018-10-04 11:42
10/4/2018

f 1 > 850-617-6384
Division of Corporations

P 1/4

L18000137607

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000288904 3)))



H180002889043ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ELO ENTERPRISES, INC
Account Number : I20150000109
Phone : (561)544-8862
Fax Number : (954)697-0130

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FILED
18 OCT -4 PM 1:50
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ALJA LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2018 OCT -4 AM 11:20

Electronic Filing Menu

Corporate Filing Menu

Help

2018-10-04 11:42

f 1 >> 850-617-6381

P 2/4

ARTICLES OF AMENDMENT H18000 2887 043
TO
ARTICLES OF ORGANIZATION
OF

ALJA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/05/2018 and assigned
Florida document number L18000137607

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**)

16876 CROWN BRIDGE DR

DELRAY BEACH, FL

33446

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

16876 CROWN BRIDGE DR

DELRAY BEACH, FL

33446

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:

ELO ENTERPRISES, INC

New Registered Office Address:

4700 NW BOCA RATON BLVD, STE 202

Enter Florida street address

BOCA RATON

City

Florida 33431

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

P 3/4

AMBR = Authorized Member

FILED
18 OCT -4 PM 1:51
Add
☐ Remove
☐ Change
TALLAHASSEE, FLORIDA
18 OCT -4 PM 1:51
Add

FILED
18 OCT -4 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

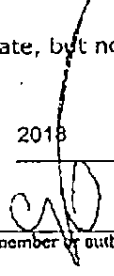
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective 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 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated OCTOBER, 02 2018



Signature of a member or authorized representative of a member

ALEXANDER VON JANKE MURAD

Typed or printed name of signer