## L18000148407

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

Office Use Only



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## **COVER LETTER**

TO:

	istration Se islon of Cor			,	
ormanom.		lligence Services LLC			
SUBJECT:Name of Limited Liability Company					
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Barna J. Szabo			
			Name of Person		
		United Intelligence Service	es LLC		
Firm/Company 4128 Central Sarasota Pkwy					
			Address	<del></del>	
		Sarasota			
			City/State and Zip Code		
		johny_brown@aol.com	to be used for future annual report n	ati Cantian)	
For further is	nformation c	n-mail address: (		ouncadon)	
Bama J. Sza	bo		941 9990450 at ()		
	Name o	f Person		ime Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 I	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)	
	iling Addres		<u>Street Address:</u> Registration S	Section	
		orporations	Division of C		
	). Box 632		The Centre of		
Ta	llahassee, l	FL 32314	2415 N. Mon	roe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa	uny as It now appears on our records.) Liability Company)	<del></del>	
	(A Florida Limited	Liability Company)		
The Articles of Organization for this Limited I Florida document number L18000148407	Liability Company	were filed on <u>06.15.2018</u>	and assig	ned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	nility company here:		
Johnny Szabo Entrepreneur LLC				
The new name must be distinguishable and contain the	words "Limited Liab	lity Company," the designation "LLC" or the ab	breviation "L.L.	C."
Enter new principal offices address, if appli	cable:	Same		
(Principal office address MUST BE A STRE	ET ADDRESS)			
			· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		Same		
(Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and/or agent and/or the new registered office addr  Name of New Registered Agent:		address on our records, enter the nam	ne of the new	register
	Same		, , , , , , , , , , , , , , , , , , ,	
New Presistent Office Address				
New Registered Office Address:		Enter Florida street address		
New Registered Office Address:		Enter Florida street address , Florida	<u> </u>	• 1
New Registered Office Address:	***************************************		Zip Code	. 1

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 =	<b>Authorized Member</b>

Title	<u>Name</u>	Address	Type of Action
			□ Add
		<del></del>	Remove
			Change
			□ Add
		<del></del>	ПRетюче
			□Change
		<del> </del>	□Add
			Remove
			Change
		***************************************	C Add
			\_Remove
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			CRemove
			□Add
			□ Remove
			☐ Change

ii amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<del></del>	
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Effectiv	e date, if other than the date of filing: (optional)
Note: I	tive 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 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as int's effective date on the Department of State's records.
record d is file	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 d.
Dated _	4.04.2021
	Signature of a member or authorized representative of a member
	Barna J. Szabo
	Typed or printed name of signee

Filing Fee: \$25.00