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Amend

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## **COVER LETTER**

TO:

TO: Registration S	ection		File
Division of Co			File Second
Lloritone	Annata LLC		50000
SUBJECT: Heritage			
	Name of Lin	nited Liability Company	
		· · · ·	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Michael Cascone		
		Name of Person	
	Heritage Assets LLC		
		Firm/Company	
	2700 West Cypress	Creek Blvd suite d107	
		Address	
	Fort Lauderdale FL	33304	
		City/State and Zip Code	
	casconem201@gmail. E-mail address: (	com to be used for future annual report noti	fication)
For further information c	concerning this matter, please c	all:	
Michael Cascone		at (561 ) 870-544	<b>!</b> 5
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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 Addres		Street Address:	
Registration 5		Registration Sec	
Division of C		Division of Cor	•
P.O. Box 632		The Centre of T	
Tallahassee,	FL 32314	2415 N. Monroe	e Street Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

File second

Heritage Assets LLC		
(Name of the Lii	mited Liability Company as it now appears (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Florida document number L18000172540		/17/2018 and assigned
This amendment is submitted to amend the fo	ollowing:	
A. If amending name, enter the new name	of the limited liability company her	<u>re</u> :
The new name must be distinguishable and contain the	e words "Limited Liability Company," the de	esignation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if app	licable:	700
(Principal office address MUST BE A STRI	EET ADDRESS)	一
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC		12:
Indusing Marces MAT BL A 1 031 0111C	<u></u>	<del>े</del> ज
B. If amending the registered agent and/or agent and/or the new registered office addr	r registered office address on our recess here:  MJC World Enterprises LLC	cords, enter the name of the new registe
Name of New Registered Agent:	MIC WORD EINERPRISES LEC	
New Registered Office Address:	7801 N FEDERAL HIGHWAY	
	1	da street address
	BOCA RATON, FL	. Florida 33487

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 Ag

ature of New Registered Agent

If amending Authorized Person(s) authorized to manage	, enter the title.	<u>, name, ar</u>	nd address of	each person	being adde
or removed from our records:					

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
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