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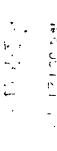
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# **COVER LETTER**

TO: Registration Section Division of Corporat	ions		
SUBJECT: FLOR	DA HURRIC	PANE ImpAot Liability Company	LLC
The enclosed Articles of Amer	idment and fee(s) are submit	ited for filing.	7
Please return all correspondence	e concerning this matter to t	the following:	
_	TosvAni	Name of Person	
UBJECT: FLORIDA AURRICANE Impast Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  The enclosed Articles of Amendment and fee(s) are submitted for filing.  TOSIANI AMARIE T  Name of Person  Firm/Company  Address  Homestean TL 33033  Englisher and Zip Code  Tosian Aurrican Aurrican Aurrican Aurrican Area Code  TOSIANI AURRICAN THE AURRICAN Area Code  TOSIANI Aurrican Aurrican Aurrican Aurrican Area Code  Tosiani Aurrican Aurrican Aurrican Aurrican Area Code  Tosiani Aurrican Aurrican Aurrican Aurrican Aurrican Area Code  Tosiani Aurrican			
Division of Corporations  URIECT: Floring Amendment and fee(s) are submitted for filing.  The enclosed Articles of Amendment and fee(s) are submitted for filing.  To symmetry and correspondence concerning this matter to the following:  To symmetry and provided the following amount:  To symmetry and the following amount:  See See See See See See See See See Se			
~-	2150 NE	= 37H Rd. Address	
_	•	•	
_	LOSVANI DON E-mail address: (to t	V TAR 2-4   Q Q M be used for future annual report potificati	Al Com
For further information concer	ning this matter, please call:		
LUSVANI // Name of Pery	Jongalez	at ( <u>786)</u> <u>382</u> Area Code Daytime Tel	8045/786 414 ephone Number/ 786 5
Enclosed is a check for the fol	lowing amount:		
▼ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

## MAILING ADDRESS:

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

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

imited 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 \_\_\_\_\_ Florida document number <u>L 18000 178698</u> 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 "LLC," 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 City

### 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

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

MGR = Manager . AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Effecti	ve date, if other than the date of filing:
f an effe Note:	ctive 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 605.02 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ant's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
Dated _	5/3/2019
	Signature of a member or authorized representative of a member
	Signature of a proposit of authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00