

L18000192772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

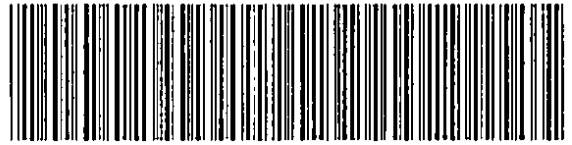
(Business Entity Name)

(Document Number)

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C. GOLDEN
SEP 17 2020

SEP 16 PM 4:34

SEP 15 AM 8:47

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: For Your Future
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ketsia T Joseph
Name of Person

For your Future
Firm/Company

11403 NW 30th Street
Address

Coral Springs FL 33065
City/State and Zip Code

Ketsia.joseph@foryourfuture-us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ketsia T Joseph at (954) 990-3108
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32307

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

For Your Future, LLC

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

2018-16-0184

The Articles of Organization for this Limited Liability Company were filed on 8/13/2018 and assigned Florida document number 418000192772

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)

11403 NW 30th Street
Coral Springs FL 33065

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11403 NW 30th Street
Coral Springs FL 33065

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:

11403 NW 30th Street
Enter Florida street address
Coral Springs Florida 33065
City 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

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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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MGR	Ketsia T Joseph	11403 NW 30 th Street	Add
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		Coral Springs FL 33065	Remove
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			Change
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AMBR	Donald Charles	11403 NW 30 th Street	Add
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		Coral Springs FL 33065	Remove
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[illegible]

(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 605.020-1.34(b).

If the record specifies a delayed effective date, but not an effective time, at 12:00 a.m. on the earlier of (b) The 9th day after the record is filed.

Signature of a member or authorized representative of a member

Kelsia T Joseph
Typed or printed name of signer

Filing Fee: \$25.00