

L18000286940

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(Business Entity Name)

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D. BRUCE
FEB 04 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FAST PACE BROTHERS, LLC

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:

ELMONCY SERCLE

Name of Person

FAST PACE BROTHERS, LLC

Firm/Company

1882 NE 170TH ST UNIT B

Address

NORTH MIAMI BEACH, FL 33162

City/State and Zip Code

ESERCLE@FASTPACEBROTHERS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELMONCY SERCLE

305 742-3473

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:

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

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JAN 28 PM 1:56
TALLAHASSEE, FL 32301

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FAST PACE BROTHERS, 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 12/14/2018 and assigned
Florida document number L18000286940.

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)

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:

1882 NE 170TH ST UNIT B

Enter Florida street address

NORTH MIAMI BEACH

Florida 33162

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>
CEO	JEAN SENATUS	1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
COO	CHRISTOPHER SERCLE	1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CFO	ELMONCY SERCLE	1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	CHRISTOPHER SERCLE		<input type="checkbox"/> Add
		515 NW 129TH ST NORTH MIAMI, FL 33168	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jean Senatus		<input type="checkbox"/> Add
		570 NW 142ND ST NORTH MIAMI, FL 33168	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Elmoncy Sercla		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL	<input checked="" type="checkbox"/> Change

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

I WOULD LIKE TO REMOVE JEAN SENATUS AS THE TITLE "AMBR" AND ADD HIM WITH THE NEW ADDRESS (1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL 33162) UNDER THE TITLE "CEO".

I WOULD LIKE TO REMOVE CHRISTOPHER SERCLE AS THE TITLE "AP" AND ADD HIM WITH THE NEW ADDRESS (1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL 33162) UNDER THE TITLE "COO".

I WOULD LIKE TO CHANGE THE ADDRESS OF THE REGISTERED AGENT (ELMONCY SERCLE) TO 1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL 33162.

I WOULD LIKE TO KEEP ELMONCY SERCLE AS THE AUTHORIZED REPRESENTATIVE BUT WITH A NEW ADDRESS - 1882 NE 170TH ST UNIT B NORTH MIAMI BEACH, FL 33162.

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E. Effective date, if other than the date of filing: 1/1/2019 **(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 JANUARY 24TH 2019



Signature of a member or authorized representative of a member

ELMONCY SERCLE

Typed or printed name of signee