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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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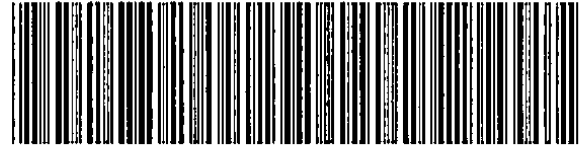
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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July 26, 2019

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

RE: Lazarus Enterprises, LLC

To whom it may concern:

The Enclosed Articles of Amendment and Fee(s) are submitted for filing and request for a certified copy. Also, please find enclosed a check for state filing fees in the amount of **\$55.00** made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addresses stamped envelope included.

Sincerely,

**Amanda J. Beren, Document Processor**  
CorpNet, Incorporated  
888-449-2638 Ext. 105  
[filings@corpnet.com](mailto:filings@corpnet.com)



CorpNet, Incorporated | 31416 Agoura Road, #118 | Westlake Village, California 91361

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

LAZARUS ENTERPRISES, 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 01/09/2019 and assigned  
Florida document number L19000010532.

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:**

2430 Vanderbilt Beach Rd., Suite 108-592 Naples FL 34109

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

2430 Vanderbilt Beach Rd., Suite 108-592 Naples FL 34109

**(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:

ENEA GJKA

New Registered Office Address:

2430 Vanderbilt Beach Rd., Suite 108-592

*Enter Florida street address*

Naples

Florida 34109

*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>
AMBR	JORGO GJIKA	2437 42ND ST SW NAPLES, FL 34116	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	KATERINA GJIKA	2437 42ND ST SW NAPLES, FL 34116	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ENEA GJIKA	2430 Vanderbilt Beach Rd., Suite 108-592	<input checked="" type="checkbox"/> Add
		Naples, FL 34109	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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**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.

Dated July 25, 2019

Enea Hija  
member or authorized representative

Signature of a member or authorized representative of a member

ENEA GJIKA

Typed or printed name of signee