## 1190000 21430

(Re	questor's Name)	<del></del>
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

TC		on Section Corporations
ST.	IRIFCT. Princ	iple Plus Interest LLC
30	boler.	Name of Limited Liability Company
		es of Amendment and fee(s) are submitted for filing.
rie	ease return an con	respondence concerning this matter to the following:
		Cameron Huth
		Name of Person
		FIRST PREMIER MARKET LLC
		Firm/Company
		2700 West Cypress Creek Blvd
		Address
		Fort Lauderdale , FI 33315
		City/State and Zip Code
		Firstpremierhealth.nc@gmail.com  E-mail address: (to be used for future annual report notification)
Fo	r further informat	ion concerning this matter, please call:
С	ameron Huth	
	<del></del>	at (954) 790-1127  Area Code Daytime Telephone Number
En	closed is a check	for the following amount:
	\$25.00 Filing Fe	ce S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2019 SEP 18 PH 3: 54 The Articles of Organization for this Limited Liability Company were filed on 1/22/2019 and assigned Florida document number \_\_\_\_L19000021430 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: 1400 Ne 55th Street Fort Lauderdale FL 33334 (Principal office address MUST BE A STREET ADDRESS) 1400 Ne 55th Street Enter new mailing address, if applicable: Fort Lauderdale FL 33334 (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: FIRST PREMIER MARKET LLC Name of New Registered Agent: New Registered Office Address: 1400 Ne 55th Street Fort Lauderdale 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Justin Carver	1400 Ne 55th Street	□ Add
		Fort Lauderdale FL 33334	☐ Remove
			Change
MGR	FIRST PREMIER MARKET LLC	1400 Ne 55th Street Fort Lauderdale FL 33334	☑ Add
			□ Remove
			Change
			□ Add
			□ Remove
			Change
		<del></del>	
			Remove
	<del></del>	<del></del> _	Change
			Add
			□ Remove
			Change
			Remove
			☐ Change

	<del></del>
	<u> </u>
Note: If the	te, if other than the date of filing:
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of day after the record is filed.
Dated 9/16/	2019

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Typed or printed name of signee

Filing Fee: \$25.00