1190000 28953

(Requestor's Name)		
(Address)	90032460	
(Address)	30002400	•
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)	02/19/1901038	i-
(Document Number)		
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Special Instructions to Filing Officer:	FEB 25 2019	•
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COVER LETTER

TO:	Registration Sec Division of Corp				
SHD IEZ		relopmental Service			
Name of Limited Liability Company					
The encl	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please ro	eturn all correspor	ndence concerning this matter	to the following:		
		Nathanael HOUNNOU			
			Name of Person	······································	
			Firm/Company		
		388 Oak Springs Ct			
	Address				
		Debary, TX 79938			
			City/State and Zip Code		
		nrhounnou@gmail.com			
Continue	nor in Formation w	E-mail address: () oncerning this matter, please or	to be used for future annual report notifi	cation)	
ror iditi	ici information ce	meering this matter, please ca	aii.		
Nathana	ael HOUNNOU		402 2123701 at ()		
	Name of	Person	at () Area Code Daytime	Telephone Number	
Enclosed	d is a check for the	e 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number L19000028953	any were filed on $\frac{01/28/2019}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ability company here:
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LI,C" or the abbreviation "L.I,C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
	ے کے بیا
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2
B. If amending the registered agent and/or registered	office address on our records enter the name of the
registered agent and/or the new registered office address h	
Name of New Registered Agent:	
New Registered Office Address:	
 -	Enter Florida street address
	Florida
	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>	Address	Type of Action
MGR	Clarisse Tamadaho	388 Oak Springs Ct Debary, Fl 32713	Add
			Remove
			☐ Change
			Add
		 	Remove
			Change
		- 	
			□ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			□ Change

D. If amending any other inf	ormation, enter change(s) h	nere: (Attach additional sheets	, if necessary.)
		 	
 			
			
			
			
		· · · · · · · · · · · · · · · · · · ·	
			-
Note: If the date inserted in	ate must be specific and cannot be p this block does not meet the app the Department of State's reco	plicable statutory filing requireme	(optional) lays after filing.) Pursuant to 605.0207 (3)(1) ents, this date will not be listed as the
If the record specifies a de (b) The 90th day after th		not an effective time, at 1	2:01 a.m. on the earlier of:
Dated February 8	2019	·	
	Signature of a member or a	nuthorized representative of a member	r
	Nathanael HOUNNOU		

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Typed or printed name of signee

Filing Fee: \$25.00