119000048201

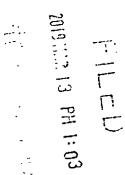
(F	Requestor's Name)	
	Address)	
(/	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT ☐ MAIL	
(1	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions	to Filing Officer:	

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08/18/15--6/00/9--611 **25.00



Amend

MAR 2/3 2019 LALERITTON

COVER LETTER

TO: Registration Sec Division of Corp	ction parations		
	ics X4, LLC		
SUBJECT:	Name of Limit	red Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filling.	
Pléase return all correspo	ndence concerning this matter t	to the following:	
	Jose A. Ramirez	•	
		Name of Person	
	Advanced Tax Advisors		
		Firm/Company	
	\$201 Peters Road, Suote 10	000	
		Address	<u> </u>
	Plantation, FL 33324		
	Jose,ramirez@advancediaxa	City/State and Zip Code	
	E-mail addiess: (to be used for future annual report notifi	CALION)
For further information of	oncerning this matter, please or	all:	
Jose A. Ramirez		954 \$88-6941 ext	
Name o	of Person	Area Code Daytime	Telephone Number
	•	N.	
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is cartised)	O \$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



(Name of the Limited Liability Company as it time appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company w	ere filed on <u>02/2</u> :	2019	and assigned
Florida document number 1.19000048201			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	ity company her	<u>.</u>	
The new name must be distinguishable and contain the words Limited Liability	y Company," the des	ignation "LLC" or the abbre	viction "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			, <u></u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here. New Registered Office Address:	ice address on	our records, <u>enter th</u>	e name of the new
New Registered Office Adules.	Duér Flori	la street address	· · · · · · · · · · · · · · · · · · ·
		, Florida	
	Czů.		Zip Cudo
New Registered Agent's Signature, If changing Registered Agent:			
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of n rovided for in Ci	ry duties, and I am fan hapter 605, F.S. Or, if	niliar with and this document is

If Changlag 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>Titte</u>	Name	Address	Type of Action
AMBR	Arthur E. Patton	4412 SW 50TH STREET DANIA BEACH, FL 33314	CI Add
			□ Remove
			☐ Change
			D Add
			☐ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
			O Add
			☐ Remove
			☐ Change
			D Add
			□ Remove
			O Change
		O Add	
			☐ Remove
			□ Chance

f amending any other inform	nation, enter change(s) here: (Attach additional shvets, if necessary.)
	
Note: If the date inserted in this	the date of filing:
ne record specifies a delay The 90th day after the r	yed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ecord is filed.
Dated March 11	2019
Cyrothia	(guature of a member or authorized representative of a member
Cynthia M. Patton	

Page 3 of 3

Filing Fee: \$25.00