

L190000 63423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

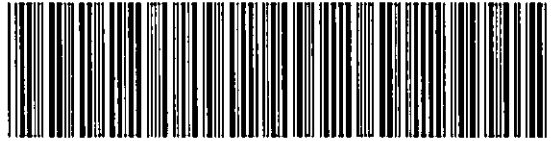
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/14/19--01003--017 **25.00

FILED
MAY 14 2019
FALLS CHURCH, VA

2019 MAY 14 P 1:35

FILED

MAY 27 2019

Law Offices of Lawrence U. Taube
500 South Australian Avenue, Suite 630
West Palm Beach, FL 33401

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

May 9, 2019

RE: Filing / Articles of Amendment to Articles of Organization (Amend name of LLC)

Dear Division of Corporations Representative,

Along with the enclosed filing is a \$25 check for the filing fee. My daytime telephone is (561) 651-4160. The return address is:

Law Offices of Lawrence U. Taube
500 South Australian Avenue, Suite 630
West Palm Beach, FL 33401

Sincerely,



Lawrence U. Taube
Manager/Member

Encl.: (3 page) Articles of Amendment to Articles of Organization (Amend name of LLC)
(1) check for \$25

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

LUT MANAGEMENT SERVICES, LLC

FILED

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2019 MAY 14 P 1:35

The Articles of Organization for this Limited Liability Company were filed on 03/05/2019 and assigned
Florida document number L19000063423 TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

LUT MANAGEMENT, LLC

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)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

N/A

New Registered Office Address:

N/A

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: _____ (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.

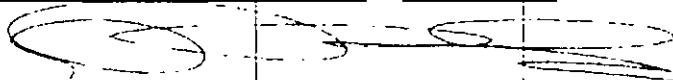
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

MAY 9

2019

Dated _____



Signature of a member or authorized representative of a member

LAWRENCE U. TAUBE

Typed or printed name of signer