L19000067014

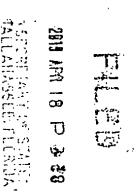
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900327610679

04/18/19--01014--024 ֥30.00



APR 2 9 20:9 T. LEMIEUX

COVER LETTER

Melanated SUBJECT:	Mindz, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Tangela Steele		
		Name of Person	
		Firm/Company	
	1897 SW Starman Avenue		
	Port St Lucie, FL 34953	Address	
	melanatedmindz.3@gmail.e		
For further information (E-mail address: (concerning this matter, please c	to be used for future annual report notifi	cation)
Tangela Steele	contenting this matter, predict of	954 303-5254	
Name (of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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)
MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:

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

TO:

Registration Section Division of Corporations

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Melanated Mindz LLC		
(<u>Name of the Limited Liabi</u> (A Florid	ility Company as it now appears on our red da Limited Liability Company)	eords.)
The Articles of Organization for this Limited Liability Florida document number L19000067014	Company were filed on 03/08/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ade		ords, enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
· 	Enter Florida street ade	dress
		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>	Type of Action
	Javon L Smith	4644 Harts Brook LN	
		Mulberry, FL 33860	
			■ Remove
			Change
			□ Remove
			□ Remove
			Change
			□ Remove
			Change
			□ Remove
			□ Change
			Remove
			Change

_	
_	
_	
_	
_	
_	
-	
_	
_	
_	
_	
_	
_	
TO THE AL	04/12/2019
Note: 1	tive 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) of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	· · · · · · · · · · · · · · · · · · ·
	- Hala Cattett
	Signature of a member or authorized representative of a member
	Tangela Steele

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00