L19000067548

(R	equestor's Name)
(A	ddress)
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(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(В	susiness Entity Name)
(D	ocument Number)
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JUN 10 2020 I ALBRITTON

COVER LETTER

Division of Corporations
SUBJECT: Black # Sign L. L. C. Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
McAnsley Dubuisson Name of Person Black # Sign L.L.C. Firm/Company
Plant HC: 11/
Black # Sign L.L.C. Firm/Company
7860 W Commercial Blvd, Suite 757
Lauderhill FL 33351 City/State and Zip Gode
City/State and Zip Code MCan Sley & black Sign C. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
McAnsley Dublisson at (786) 218-8277 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status □ Certified Copy

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



May 12, 2020

MCANSLEY DUBUISSON 7860 W. COMMERICAL BLVD STE. 757 LAUDERHILL, FL 33351

SUBJECT: BLACK#SIGN L.L.C. Ref. Number: L19000067548

We have received your document for BLACK#SIGN L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 820A00009629

Irene Albritton Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Black # Sian L.L.C.	
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L. 1900067548</u> . This amendment is submitted to amend the following:	were filed on March 11, 2019 and assigned
A. If amending name, enter the new name of the limited liab	ility company here:
Black#Sinn LLC	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7860 W Commercial Blud
(Principal office address MUST BE A STREET ADDRESS)	Suite 757 Lauderhill, FL 33351
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature if changing Pegistered Agents	

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>	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			Remove
			□Change
			□Add
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			Change
			□Add
		□Remove	
		 	□Add
			□Remove
			□Change

Page 2 of 3

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(If an ef Note:	ive date, if other than the date of filing:
	cord 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	Ob/194/2020 Suce 4, , 2020.
	A Barrey
	Signature of a member or authorized representative of a member
	McAnsleys Dubyisson Typed or printed name of signee