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Office Use Only



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R. WHITE APR 22 2009



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SUBJECT: 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:
Name of Person
Suburban urban
4610 NE By Street
Deer field Beach Il 33064 City/State and Zip Code Kaihana Tean Jawson E-mail address: (10 be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at 561 508 7134 Name of Person TArea Code Daytime Telephone Number
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$Certificate of Status \$\Bigcup \$

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 $T\Omega$

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ARTICLES OF ORGANIZATION	
OF	Sign

<u>Juburhan</u> u	2019 APR 15 PH 4: 48
(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on
Florida document numberMARCL 2]	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4610 NEISTAVE
(Principal office address MUST BE A STREET ADDRESS)	Deer field Beach
	FG 33069
Enter new mailing address, if applicable:	4610 NE ISTAVE
(Mailing address MAY BE A POST OFFICE BOX)	Deerfield Beach
	FC, 3306d
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
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>	Name	Address	Type of Action
NGR AMBR	Cindy Jean	21610 WEIST AVE Deer G	Add Machemove L 33
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ective date, if other than t effective date is listed, the date n te: If the date inserted in this ument's effective date on the	nust be specific and canno block does not meet th	et be prior to date of the applicable statu	filing or more than 9	00 days after f	iling,) Pursuant to 605.0207
record specifies a delay he 90th day after the re		but not an effe	ective time, al	: 12:01 a.	m. on the earlier of
ed April 91	<u>H</u> . 2	_019.	1		
· 	Signature of a member	er or authorized repr	esentative of a men	<u>Xeon</u> iber	
	Kaih	O h no	Jean	Law:	20N

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Filing Fee: \$25.00