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Amend

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COVER LETTER

		ration Sect on of Corpo			
CHD IFA		EVER YOU	ING DELRAY LLC		
SUBJEC	-l; <u> </u>		Name of Limite	ed Liability Company	
The encl	osed A	rticles of A	mendment and fee(s) are subm	itted for filing.	
Please re	turn al	l correspond	lence concerning this matter to	the following:	
			Paul D. Scott		
				Name of Person	
			4EVER YOUNG DELRAY LL		
			 	Firm/Company	<u></u>
			6250 Coral Ridge Drive	. ,	
				ne of Limited Liability Company s) are submitted for filing. his matter to the following: Name of Person DELRAY LLC Firm/Company Drive Address 33076 City/State and Zip Code Ing@gmail.com address: (to be used for future annual report notification) please call: 1 954 263-0669 at (
			Coral Springs, FŁ 33076		
			hackneybookkeeping@gmail.	City/State and Zip Code com	
			E-mail address: (to	be used for future annual report notific	ation)
For furth	er info	rmation con	cerning this matter, please call	l:	
Paul D.	Scott				
		Name of P	erson		Celephone Number
Enclosed	l is a ch	neck for the	following amount:		
\$25. 0	00 Filiz	ng Fee	□ \$30.00 Filing Fee & Certificate of Status		

MAILING ADDRESS:

TO:

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

HACKNEYBOOKKEEPING@gmail.com		
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	·
The Articles of Organization for this Limited Liability Com	npany were filed on March 15, 2019	and assigned
Florida document number L19000073964		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
he 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 ADDRES	<u> </u>	78
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nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		2010 17:3 19 PN 4: 37
		<u> </u>
		<u>۔</u>
3. If amending the registered agent and/or registere egistered agent and/or the new registered office address	ed office address on our records, <u>e</u> <u>s here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	aZip Code
	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>	Address	Type of Action
MGR	Mario De Luca	701 S. Rosemary Ave. Apt 212	-
		IM-A D-I D I 51 00404	Add
		West Palm Beach FL 33401	
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ffecti	ate, if other than the date of filing: (optional)
an cff <u>(ote:</u>	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 605.020 c date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o h day after the record is filed.
لديروروا	15 2019
ated	· —/-·
	Last Dett

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00