## 1190000 76653

(Red	uestor's Name)	
(Add	lress)	<del></del>
	lress)	
(Add	11622)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Rus	iness Entity Nar	ma)
(Dus	mess Emply Mar	ine)
(Doc	ument Number)	-
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		ł
<del></del>		





300326866583

04/01/19--01019--008 \*+25.00

FILED

19 APR -1 AM 5: 13

MEGRETARY OF STATE
CALLAHASSEE, FLORIDA



## **COVER LETTER**

	ertising Agency, LLC		
(VBJE.C.1:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
	ndence concerning this matter t		
	Angela Idlette		
	<u> </u>	Name of Person	
	Idlette Advertising Agency	, LLC	
		Firm/Company	
	642 NE 1st Place		
		Address	
	Cape Coral, FL 33909		
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notifi	cation)
For further information of	concerning this matter, please co	all:	
Angela Idlette		239 288-9923 at ()	
Name o	of Person	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)

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 TO ARTICLES OF ORGANIZATION OF

Idlette Advertising Agency, LLC (Name of the Limited Liability Company as it no	w appears on our records.)
( <u>Name of the Limited Liability Company as it no</u> (A Florida Limited Liability Co	ompany)
The Articles of Organization for this Limited Liability Company were file Florida document number $\frac{1.19000076653}{1.19000076653}$	ed on 3/19/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	my," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>
(Principal office address MUST BE A STREET ADDRESS)	
	——————————————————————————————————————
Enter new mailing address, if applicable:	1
(Mailing address MAY BE A POST OFFICE BOX)	<u>Σπ</u> <u>ω</u>
B. If amending the registered agent and/or registered office aderegistered agent and/or the new registered office address here:	dress on our records, enter the name of the no
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
City	, Florida Zip Code
$\epsilon \cdot \eta \dot{\lambda}$	zyr Cira

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

Title	<u>Name</u>	Address	Type of Action
MGR	Jamaal Idlette	642 NE 1st Place Cape Coral, FL 33909	
		<del></del>	Remove
			☐ Change
			□ Add
			☐ Remove
			Change
			<b>9</b>
			Fi ⊊ □ Remove
			55 Change
			Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change

			-							<del></del>		_
								_				
												<del></del>
					_							
			<del></del>						_	3-1-1	<u>ත්</u>	
					-					三层	APR	— <u>1</u>
		<del></del>					_			53.5		
							_				至	
_											<del>;</del>	<del></del>
							-			<b></b>	_ <u>~</u> ~	
												<del></del>
				_	_	·					_	<del></del>
								<del></del>	-		-	
		-	-									
Effective	e date, if o	ther than	the date	of filin	g:	· prior to d	ue of tiling	or more than	(op	t <b>ional)</b> er filing.) Pu	rsuant te	605,020
Note: If	the date in: it's effective	serted in th	is block d	oes not r	neet the a	ipplicable	statutory	filing requir	ements, th	is date wil	l not be	listed as
aocumen	a s enecuv	z date on u	ie rzeparn	nem or .	nac s re	cords.						
the reco ) The 9	rd specifi Oth day a	es a dela after the	yed effe record i	ective o s filed.	date, bu	ut not a	n effectiv	ve time, a	it 12:01	a.m. on	the e	arlier o
Dated N	farch 28th	٠,	1		2019		0	, -				
(	_	X	-		-			// FA	4			
`.			120	. // /	'n		-X/U	1 4//	/ U			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00