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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053

Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number L19000077291	ompany were filed on March 19, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ited 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 ADDR.	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7020 SEP 1
	d office address on our records, <u>enter the n</u>	ame of the new registered
B. If amending the registered agent and/or registered agent and/or the new registered office address here:		ر 13 کی
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:		3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
agent and/or the new registered office address here:	Enter Florida street address	3
Name of New Registered Agent:		Zin Code

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 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
MGR	Jarred John	100 SW 3rd Avenue	≣Add
		Fort Lauderdale, FL 33312	⊟Remove
			☐ Change
MGR Edwa	Edward John	62 S. Wynstone Drive	
		Barrington, IL 60010	□Remove
			☐Change
			□Add
			Remove
			☐Change
			□Add
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Note:	ive date, if other than the date of filing:
docum	ent's effective date on the Department of State's records.
ne recor ord is fi	of specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	September 11th 2020
	SS
	\sim
	Signature of a member or authorized representative of a member