L14 0000 78330

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200327571462

04/15/19--01032--021 **00.00



04/22/19

COVER LETTER

	Registration Se Division of Cor		•	
SUBJEC	***	er Enterprise LLC		
		Name of Lim	ited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Lucas Casimir		
			Name of Person	
		L & J Power Enterprise LL	.C	
			Firm/Company	
160 SW 37th Ave				
			Address	
		Fort Lauderdale FL 33312		
		lcasimir@ljpowerenterprise	City/State and Zip Code .com	-
		E-mail address: (to be used for future annual report notif	ication)
For furth	er information c	oncerning this matter, please ca	all:	
Lucas Ca	asimir		954-451- 6062 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne 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

(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited	Liability Company were filed on $\frac{C}{C}$	03/22/2019 and assigned
Florida document number 83-4150907		
This amendment is submitted to amend the fo	lowing:	
A. If amending name, enter the new name	of the limited liability company	<u>here</u> :
The 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 appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
		# S =
		100 To 100
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE		िहरू क
manifestion with the state of the con-		<u>्रेल</u> प्र
B. If amending the registered agent and	l/or registered office address o	on our records, enter the name of the
registered agent and/or the new registered o	4,	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:	Lucas Casimir	
	160 SW 37th Ave	

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.

Fort Lauderdale

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_____, Florida 33312 Zip Code · 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	Lucas Casimir	160 SW 37th Ave Fort Lauderdale FL 33312	Add
			□ Remove
			□ Change
<u> </u>			Add
		 -	Remove
			☐ Change
			Remove
			EF-Change
			0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0
			□ Remove
			Change
			Remove
			Change
			Add
			☐ Remove
			□ Change

		<u></u>			
			<u></u>	 .	
			<u></u> ,		·
				 .	
					
				3.7.1.1	5
			1-7-7-		-n
					5 1
					2 D
				10 E	<u>ත</u>
				72 72	-8-
- <u></u>					
				-	
ective date, if other than the date effective date is listed, the date must be: If the date inserted in this block ument's effective date on the Department.	k does not meet the app	plicable statutor	ng or more than 90 da y filing requiremen	(optional) ys after filing.) P nts, this date wi	ursuant to 605.0 Il not be lister
record specifies a delayed e he 90th day after the recor		not an effect	tive time, at 12	2:01 a.m. or	the earlie
April 09	2019				
ai		7			
	الربي المستسسس		-(
	gnature of a member or a				

Page 3 of 3

Filing Fee: \$25.00