L19000092478

(Req	estor's Name)
(Addı	ess)
(Addı	ess)
(City/	State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Busi	ness Entity Name)
(Doci	ment Number)
Certified Copies	Certificates of Status
Special Instructions to Fi	ing Officer:
-	Office Use Only



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COVER LETTER ...

TO:

Registration Section

Division of	f Corp	orations				
SELL	READ	Y LLC				
SUBJECT:		Name of Limi	ited Liability Company			
The enclosed Article	es of A	amendment and fee(s) are sub-	mitted for filing.			
Please return all cor	respon	dence concerning this matter	to the following:			
		CHARLES PARDEE				
		SELLREADY LLC	Name of Person	······································		
		 	Firm/Company			
		5006 TROUBLE CREEK I				
		NEW PORT RICHEY, FL	Address 34652			
		CHARLES@SELLREADY	City/State and Zip Code .COM			
		É-mail address: (i	to be used for future annual report no	tification)		
For further informat	tion cc	ncerning this matter, please co	ıll:			
CHARLES PARDE	EE.		727 520-4899 at ()			
N:	ame of	Person	Area Code Dayti	me Telephone Number		
Enclosed is a check	for th	e following amount:				
■ \$25.00 Filing Fo	ee	□ \$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)		
R D P.	egistra ivision .O. Bo	NG ADDRESS: tion Section of Corporations x 6327 sec. FL 32314	STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive C Tallahassee, FL	orations Tenter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SELEKEADY LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	uny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L19000092478	were filed on 4/3/2019 and assigned
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:	
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	- F. P. T.
Enter new mailing address, if applicable:	A SSE
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, enter the name of the no
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zip 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 Title Name **Address** Type of Action CHARLES T PARDEE 6111 2ND AVE, NEW PORT MGR RICHEY, FL 34653 \square Add ☐ Remove Change NICOLA A IRIZARRY 8148 BRINEGAR CIR, TAMPA, MGR FL 33647 **■** Add ☐ Remove ☐ Change AUSTIN S CUMMINGS 12818 LEXINGTON SUMMIT MGR ST, ORLANDO, FL 32828 ; g⊟ Reonove □ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove

_□ Change

CHAI	RLES T PARDI	s ts						
		Signature of	f a member or aut	norized represent	ative of a member			
APRIL 23	RD		2019					
record spec The 90th da	cifies a delay y after the re	ed effective ecord is file	e date, but n d.	ot an effecti	ve time, at 12	:01 a.m. on ti	ıe earl	lier o
eument's effec	tive late on the	Department o	of State's record	8.				
n effective date i	if other than the slisted, the date not inserted in this	nust be specific	and cannot be price	or to date of tiling	or more than 90 day	(optional) ys after filing.) Pursi its, this date will n	aant to 60	05.020
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Filing Fee: \$25.00