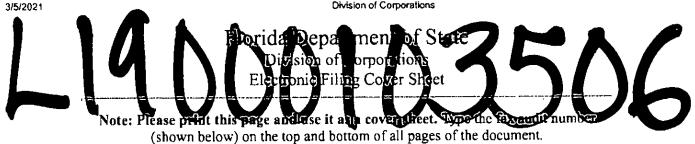
Division of Corporations



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To:

\* Page: i of 4

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077 Fax Number : (845)818-3588

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRODZICKI GROUP, LLC

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Help

## ARTICLES OF AMENDMENT , TO \* ARTICLES OF ORGANIZATION OF

GRODZICKI GROUP, LLC				_	
(Name of the Limit	ed Liability Compa (A Florida Limited)	iny as it now appears on our reco Liability Company)	rds.)		
The Articles of Organization for this Limited Li Florida document number <u>L19000103506</u>	ability Company	were filed on APRIL 15, 20	19 and a	assigned	
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	f the limited liab	oility company here:			
NICHOLAS DAVID GRODZICKI LLC			_		_
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "Ll	LC" or the abbreviation	"L.L.C."	_
Enter new principal offices address, if applicable:		501 NE 131st St	35.	2021	_
(Principal office address MUST BE A STREE	submitted to amend the following:  ame, enter the new name of the limited liability company here:  D GRODZICKI LLC  distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation oal offices address, if applicable:    Sol NE 131st St	<u> </u>	_		
	<u> </u>				
Enter new mailing address, if applicable:		501 NE 131st St	:\ -:\ -:\	는 가 의 N M C	
.,	ROX)	North Miami, FL 33161			_
(Mailing address MAY BE A POST OFFICE BOX)			•	<u> </u>	_
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, ent	er the name of the	new registe	<u>ered</u>
Name of New Registered Agent:			<del></del>		-
New Registered Office Address:	501 NE 131s				_
		Enter Florida street add			
	North Miami		Florida 33161	<del></del> _	_
		City	Zip Co	rde	

## 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.

To: 18506176383 Page: 3 of 4

2021-03-05 18:20:42 GMT

18886118813

From: Vcorp Services, LLC

Hamending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or remoyed from our records:

MGR = Manager	
AMBR = Authorized Member	

<u>Title</u>	Name	Address	Type of Action
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			Remove
			□ Change
			□Remove
			Change
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Effective date, if other than the date if an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	specific and cannot be prior to date a does not meet the applicable s artment of State's records.	tatutory filing requireme	nts, this date will not be lis	sted as t
	ate, but not an effective time, at	12:01 a milion the earlie	er of (b). The 90th day aft	er the
e record specifies a delayed effective d rd is filed  MARCH 5TH	Nicholas ).	Grodzicki		