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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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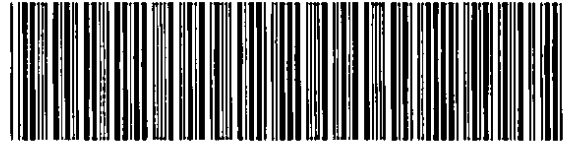
(Business Entity Name)

(Document Number)

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05/13/19--01010--015 **25.00

FILED

2019 MAY 13 A 3:02

FROM: DEPT OF COMMERCE
TALLAHASSEE, FLORIDA

TELEPHONE

MAY 2 2 2019

Profame, LLC
3563 Huntington Place Dr
Sarasota, FL 34237

May 8, 2019

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314


Doc # L19000116114
Date filed: 04/29/19

Dear Sir, or Madame:

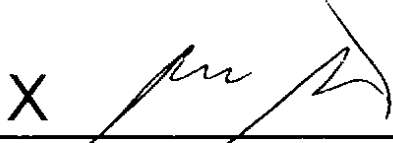
Amendment to Articles of Organization of Florida Limited Liability Company "Profame, LLC" is being filed to correct name of the Member/Registered Agent/ Incorporator (One individual), which was incorrectly entered during online electronic registration.

The Article of Organization were filed on 04/29/19, as soon as filing records were available on Division of Corporation website, we discovered that name of Robert I. Mendre (AMBR), who is a member, Registered Agent and Incorporator was incorrectly recorded as Robert Istvan (First and Middle Name), **instead Robert I. Mendre** (first, middle and last name). Therefore, we like to correct the error by filling amendment of the articles.

Sincerely,

X 

CSABA FARKAS
AMBR

X 

ROBERT I. MENDRE
AMBR

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: PROFAME, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT I MENDRE

Name of Person

PROFAME LLC

Firm/Company

3563 HUNTINGTON PLACE DR

Address

SARASOTA FLORIDA 34237

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT I MENDRE

813

4852190

Name of Person

at ()

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

FILED

PROFAME, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

2019 MAY 13 A 3:52

The Articles of Organization for this Limited Liability Company were filed on 04/29/2019 and assigned
Florida document number L19000116114

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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 applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ROBERT I MENDRE

New Registered Office Address:

3563 HUNTINGTON PLACE DR

Enter Florida street address

SARASOTA

City

Florida 34237

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

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|--|--|
| AMBR | ROBERT ISTVAN | 3563 HUNTINGTON PLACE DR SARASOTA, FL 34237 | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | ROBERT I MENDRE | 3563 HUNTINGTON PLACE DR SARASOTA, FL 34237 | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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| | | | <input type="checkbox"/> Change |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

INCORPORATOR NAME CHANGE:

REGISTERED AS: ROBERT ISTVAN

CORRECT NAME : ROBERT I MENDRE

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated

May 9, 2019

Signature of a member or authorized representative of a member

MENDRE ROBERT

Typed or printed name of signee

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

INCORPORATOR NAME CHANGE:

REGISTERED AS: ROBERT ISTVAN

CORRECT NAME : ROBERT I MENDRE

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _____

May 9, 2019

Signature of a member or authorized representative of a member

ROBERT MENDRE

Typed or printed name of signee