

L19 000 132972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

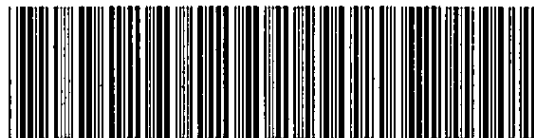
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500334333895

09/13/19--01004--002 **25.00

FILED

2019 OCT 11 AM 9:46

SULKER

OCT 14 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2019

ETERNITIVE LLC
5027 W LAUREL STREET SUITE 201-202
TAMPA, FL 33607

SUBJECT: ETERNITIVE LLC
Ref. Number: L19000132972

We have received your document for ETERNITIVE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

IF YOU WANT TO CHANGE THE BUSINESS NAME THE NAME MUST BE DIFFERENT THAN THE CURRENT NAME

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 719A00020324

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Eternitive 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:

Mariam Hamdan

Name of Person

Eternitive LLC

Firm/Company

5027 W Laurel Street Suite 201-202

Address

Tampa, Florida, 33607

City/State and Zip Code

eternitivecompany@gmail.com

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

For further information concerning this matter, please call:

Mariam Hamdan

239

284-8039

at ()

Name of Person

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**

Eternitive LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/16/2019 and assigned
Florida document number L19000132972

This amendment is submitted to amend the following:

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

~~Eternitive LLC~~

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)

~~5027 W Laurel Street~~

~~Tampa, Florida 33607~~

19420 Via Del Mar

Tampa / FL 33647

Apt: 308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

~~5027 W Laurel Street~~

~~Tampa Florida, 33607~~

19420 Via Del Mar

Apt: 308

Tampa / FL 33647

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:

New Registered Office Address:

Enter Florida street address

Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Hussien Samad	28674 Bird watch loop Wesley chapel Floirda 33543 APT 302	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		19420 Via Del Mar Tampa Florida 33647 Apt 308	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be from a notebook or a standard ruled document. There is no handwriting or other markings on the page.

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be at least 15 days before the date of filing.)

(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 09/13/2019

~~Signature of a member or authorized representative of a member~~

Mariam Hamdan

Typed or printed name of signee