L19000136106

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COVER LETTER

TO:	Registration Se Division of Cor					
CHDIE	Eden Teppe					
SUBJE	CI:	Name of Limited Liability Company				
The enc	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspo	ndence concerning this matter	to the following:			
		Eden C Tepper				
		Eden Tepper LLC	Name of Person			
		608 Upland Road	Finn/Company			
		Address West Palm Beach, FL 33401				
		eden@edenctepper.com	City/State and Zip Code			
		E-mail address: (to be used for future annual report notif	ication)		
For furt	her information c	oncerning this matter, please ca	all:			
Eden T	epper		561 373-4411			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclose	ed 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

Eden Tepper 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 05/29/2019 _ and assigned Florida document number _____19000136106 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Eden C Tepper LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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: New Registered Office Address: Enter Florida street address

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>	Name	Address	Type of Action
			
			□ Remove
			☐ Change
			☐ Remove
			☐ Change
			Add
			Remove Service Remove Remove Remove
			Remove
			Remove
			☐ Change
			Remove
			☐ Change
			□ Add
			□ Remove
			Change

D. If amending any other infor	mation, enter change(s) here: (Attach add	ditional sheets, if necessary.)	
			
			
			
			
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Note: If the date inserted in thi	must be specific and cannot be prior to date of filing s block does not meet the applicable statutory to Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605. filing requirements, this date will not be liste	0207 (3)(I d as the
If the record specifies a dela (b) The 90th day after the	yed effective date, but not an effective cord is filed.	ve time, at 12:01 a.m. on the earlie	er of:
Dated July 2	Signature of a member or authorized representa	ative of a member	
Eden C Tepper	<u> </u>		
···	Typed or printed name of signs	ee	

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