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COVER LETTER

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TO: Registration Division of 0	i Section Corporations		
SUBJECT:	yr wood Mar Name of Lim	Keting and (Pronotion C.L.C
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
		Name of Person	Promotion (.L.C
	10341 NW E		
	A .	City/State and Zip Code 0176 yahoo.co	
For further information	n concerning this matter, please ca	all:	
Benjamin	e of Person	at (<u>954</u>) <u>520</u> Area Code Day) - 2967 Time Telephone Number
Enclosed is a check for	or the following amount:		
□ \$25.00 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)
P.O. Box 6	n Section f Corporations		Section Corporations f Tallahassee proe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Nynwood Marke	ting and Pr	omotion L.L.C
(Name of the Limited L.) (A F	iability Company as it now appears lorida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabil Florida document number L 19 000 1 43	ity Company were filed on <u>5</u> 864	$\frac{13012019}{2019}$ and assigned
This amendment is submitted to amend the following	ıg:	
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :
The new name must be distinguishable and contain the words	"Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A.	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or registagent and/or the new registered office address he	tered office address on our rec	ords, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	a street address
_	City	Florida
		sale come

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>	Address	Type of Action
MGR	Jonathan D Garcia	10341 NW 6th Ave	□Add
		Miumi, FL 33150	□Remove
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
		□Change	
		🗀 Add	
		□Remove	
			□Change
 			□Add
		□Remove	
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		□Remove	
			□Change
			□Add
			□Remove
			□ Change

Page 2 of 3

р. пап	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	12/16/19
	man June
	Signature of a member of authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00