

L190000 164 476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

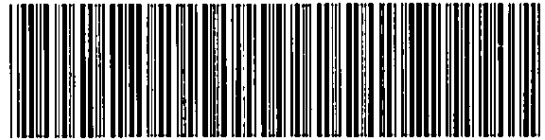
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/28/19--01029--033 **30.00

FILED
SECRETARY OF STATE
10 OCT 29 PM 4:31

Amend

10/25/2019

10/25/2019

NEW REGISTERED
AGENT.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 100 FUNDERS 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:

CARLOS RANCANO
Name of Person

100 FUNDERS LLC
Firm/Company

(NEW) 5620 S.W. 199 AVE.
Address

FT LAUDERDALE FL 33332
City/State and Zip Code

crancanowong@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS RANCANO at (786) 287 3524
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

15 OCT 28 PM 4:21

STATE
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

100 FUNDERS L.L.C

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

19 OCT 28 PM 4:31
CLERK OF COURT
CLERK OF COURT
CLERK OF COURT

The Articles of Organization for this Limited Liability Company were filed on JUNE 24 2019 and assigned Florida document number L19000164476

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)

5620 S.W. 199 AVE
FT LAUDERDALE FL 33332

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5620 S.W. 199 AVE
FT LAUDERDALE FL 33332

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:

CARLOS RANCANO

New Registered Office Address:

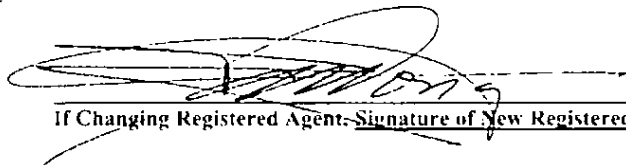
5620 S.W. 199 AVE

Enter Florida street address

FT. LAUDERDALE Florida 33332
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>
REGISTERED AGENT	JUAN M. RANCANO	729 NW 2 STREET APT # 421 MIAMI FL 33128 U. S. A.	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

RANCANO VENTURES LLC WITH ADDRESS
729 NW 2ND STREET APT 421
MIAMI FL 33128 ARE NOT
AUTHORIZED TO MANAGE 100 FUNDERS LLC
AS OF THE DATE ON THIS FORM
(OCT 24 2019)

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

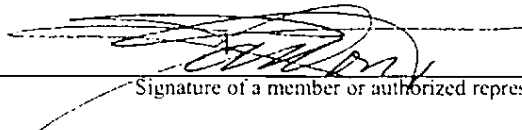
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605.0207 (3)(b))

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 10 24 2019.



Signature of a member or authorized representative of a member

CARLOS RANCANO

Typed or printed name of signee