L19000166703

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000)195	
	REFERENCE	;	640330	8277421	
	AUTHORIZATION	d	nelle	TROWN	
~	COST LIMIT	7:	\$ 25.00		
ORDER DATE : J	anuary 29, 2021				
ORDER TIME : 1	2:21 PM				
ORDER NO. : 6	40330-005				
CUSTOMER NO:	8277421				
NAME:	DOMESTIC AMI			ī <u>G</u>	
EFFECTIVE	DATE:				
XX ARTICLES RESTATED	OF AMENDMENT ARTICLES OF INCO	RPOF	ATION (
PLEASE RETURN T	HE FOLLOWING AS 1	PROC	F OF FILI	NG:	
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EXAMINER'S INITIALS:

CONTACT PERSON: Eyliena Baker -- EXT#

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	CHARLES-N-ANGEL'S, L	LC
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000166703</u>	were filed on 06/25/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:	505 7th Street NW	
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34120	
Enter new mailing address, if applicable:	505 7th Street NW	
(Mailing address MAY BE A POST OFFICE BOX)	Naples, FL 34120	
D. If any distribution is a second se		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of	the new registered
Name of New Registered Agent:		7 7
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City Zi	ip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am famil provided for in Chapter 605, F.S. Or, if th	iar with and is document is

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	Wanda I. Rankin	505 7th Street NW	
		Naples, FL 34120	□Remove
			□Change
AMBR	Angel S. Areizaga	505 7th Street NW	• Add
		Naples, FL 34120	□Remove
			Change
			□Add
			□ Remove
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			Remove
			□Change
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		<u>-</u>	□ Remove
			□Change

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	02/12/2021
lf an cf <u>Note:</u>	ive date, if other than the date of filing: 02/12/2021 (optional) fective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e recoi	d 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 led.
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Filing Fee: \$25.00