# L19000173708

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# **COVER LETTER**

TO:	Registration Se Division of Cor			
CLIDI		S HIGHWAY, LLC		
SUBJ	ECT:	Name of Limi	ted Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please	return all correspo	ndence concerning this matter t	to the following:	
		CHAD MATTHEW MUNI	EY, ESQ.	
		CLARK & MUNEY PLLC	Name of Person	<del></del>
				<del>_</del> _
		2400 E. COMMERCIAL B	Firm/Company ELVD. #820	
		FORT LAUDERALE FL 3	Address 3308	
		MAIL@PALMETTOSTAT	City/State and Zip Code ES.COM	
		E-mail address: (t	o be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ca	III:	
_(	had Marne o	Umou f Person	at (954) 776 - Area Code Daytime	3 CO
Enclos	ed is a check for th	ne following amount:		
<b>■</b> \$2	5.00 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:

en and a second

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

ny as it now appears on our records.) Liability Company)	<del></del>		
were filed on JULY 3, 2019	and assigned		
ility company here:			
ity Company," the designation "LLC" or	the abbreviation "L.L.C."		
4303 NE 1st Terrace #2			
Fort Lauderdale, FL 33334-3157	2019 TAN		
	AUG-2 AN 8:36		
fice address on our records, <u>e</u>	nter the name of the r		
Enter Florida street address			
Emer Fioraa street adaress			
, Florid	daZip Code		
	ility company here:  ity Company." the designation "LLC" or  4303 NE 1st Terrace #2  Fort Lauderdale, FL 33334-3157  fice address on our records, eg:  Enter Florida street address , Florida.		

## 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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ective date, if other than the da	te of filing:		(option	ıal)
effective date is listed, the date must be e: If the date inserted in this block	does not meet the appl	icable statutory filing	re than 90 days after for requirements, this of	ling.) Pursuant to 605.02 date will not be listed a
ument's effective date on the Depa	rtment of State's record	ls.		
record specifies a delayed e	ffective date but a	not an effective til	me at 12:01 a	m on the earlier
he 90th day after the record		iot an enective th	ne, at 12.01 a.	in, on the earlier
ALIGHET	2019			
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Filing Fee: \$25.00