## 119000175757

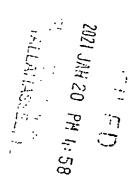
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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LA. 2/22/21

## **COVER LETTER**

TO:	Registration Se Division of Cor				• " •••
	Colleen NIc	cole LLC			•
SUBJI	ECT:	Name of Lim	ited Liability Company		
The en	sclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		Colleen Sugalski			
			Name of Person	•	
		Colleen Nicole IIc			
			Firm/Company		<del></del>
		10710 NW 54 Place			
			Address	•	
		Coral Springs, FLorida 330	76		
		colleen.n.sugalski@gmail.co	City/State and Zip Code	-	
			o be used for future annual rep	ort notification)	
For fur	ther information co	oncerning this matter, please ca	ill:		
Collee	n Sugalski		908 787 6		
	Name of	Person	Area Code	Daytime Telepho	ne Number
Enclos	ed is a check for th	e following amount:			
<b>≡</b> \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclose		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	<u>u</u>	Street Addr	'ess:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Colleen Nicole LLC

( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our record Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Company Florida document number <a href="https://example.com/linearing&lt;/th&gt;&lt;th&gt;were filed on &lt;u&gt;07/08/2019&lt;/u&gt;&lt;/th&gt;&lt;th&gt; and assigned&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;This amendment is submitted to amend the following:&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;A. If amending name, enter the new name of the limited lial&lt;/th&gt;&lt;th&gt;oility company here:&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;The new name must be distinguishable and contain the words " liab<="" limited="" th=""><th>ility Company," the designation "LLC</th><th>" or the abbreviation "L.L.C."</th></a>	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		202 <sub>1</sub>
(Principal office address MUST BE A STREET ADDRESS)		
		1 2 1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		Co
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter	
	E	orida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u> </u>	
I hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, an provided for in Chapter 605, i	nd I am familiar with and F.S. Or, if this 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>	<u>Address</u>	Type of Action
ambr	Adam E. Friedman	10710 NW 54 Place	<b>=</b> Add
		Coral Springs, Florida 33076	□Remove
			☐ Change
			□Add
			Remove
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
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			Dbdd
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			<del></del>
		<del></del>	
+ <del></del>			
		<del></del>	
			<u> </u>
	<del></del>		
<del></del>			
reffective date is listed, the date <b>te:</b> If the date inserted in thi	must be specific and cannot be prior to date of solock does not meet the applicable state Department of State's records.	of filing or more than 90 days after f	iling.) Pursuant to 605,020
cord specifies a delayed effe s filed.	ctive date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after the
ed	<b>₹</b> \$ 2021		
January	1/11 50 601	epresentative of a member	

Filing Fee: \$25.00