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COVER LETTER

Registration Section Division of Corporations THE ACKEE GROUP LLC BJECT: Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. case return all correspondence concerning this matter to the following: TOUSANT TAYLOR Name of Person THE ACKEE GROUP LLC Firm/Company 9746 SW 184TH ST Address **CUTLER BAY FL 33157** City/State and Zip Code tousant@trending-tech.com E-mail address: (to be used for future annual report notification) for further information concerning this matter, please call: TOUSANT TAYLOR 426-3082 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & **S** S25.00 Filing Fee ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address:

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

THE ACKEE GROUP LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our records.) inted Liability Company)	
ne Articles of Organization for this Limited Liability Com	pany were filed on 07/15/2019	and assigned
orida document number 1.19000180864		
ais amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	//c 🗪
		550 150 1019
ac new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" o	r the abbrevier on "P.C."
inter new principal offices address, if applicable:		Σ (C) (Max.)
Principal office address MUST BE A STREET ADDRES	<u></u>	
Inter new mailing address, if applicable:		21 21 24
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of	fice address on our records, enter the	e name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	da
	City	Zıp Code
New Registered Agent's Signature if changing Dagistared A.	n Amér	

New Registered Agent's Signature, it 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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager

ABR = Authorized Member

<u>tle</u>	Name	Address	Type of Action
GR	HOWARD TAYLOR	9746 SW 184TH ST CUTLER BAY FL 33157	□Add
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Effective date, if other than the date (If an effective date is listed, the date must be s	pecific and cannot be prior to date	of filing or more than 90 days after fil	a <mark>l)</mark> ing.) Pursuant te	s 605.0207 (
Note: If the date inserted in this block dedocument's effective date on the Depart	loes not meet the applicable sta	ntutory filing requirements, this d	ate will not be	: listed as t
he record specifies a delayed effective date ord is filed.	e, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day	after the
Dated DECEMBER 17TH	2019			
	4- 5-			

Filing Fee: \$25.00

Typed or printed name of signee