19000-203	S Man
(Requestor's Name) (Address) (Address)	200347393162
(City/State/Zip/Phone #)	07/02/2001011027 ** 25.00
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Office Use Only	AUG 1 5 2020 S. YOU'NG

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ARTICLES OF	AMENDMENT				
TO					
	DRGANIZATION				
Ĺ)F				
PELICAN IDEAS LLC.					
(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	were filed on <u>08/12/2019</u> and assigned				
Florida document number L19000203969					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	<u>pility company here</u> :				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	3851 WINTER ROSE DRIVE				
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32808				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>				
Name of New Registered Agent: LINA M. GAL	LEGO				

8832 CORAL PALMS CT. UNIT A New Registered Office Address:

Enter Florida street address

KISSIMMEE	, Florida ³⁴⁷⁴⁷	
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

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<u>Title</u>	Name	Address	Type of Action
MGR	HERNAN C. FIGUEREDO	8832 CORAL PALMS CT UNIT A	🗆 Add
		KISSIMMEE, FL 34747	
			□ Change
	- <u></u>		🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 JUNE 30	2020 CUNAUU
	Signature of a member or authorized representative of a member
LINA M. GALLEGO	- MGR

Typed or printed name of signee