119000 238 252

(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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COVER LETTER

TO: Registration Sec Division of Corp	• *		·*		
SUBJECT: 750	12				
Substitution of the substi	Name of Limit	ed Liability Company			
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.			
Please return all correspon	dence concerning this matter t	o the following:			
	Russent 1	Name of Person	<u> </u>		
		Name of Person			
	AREARM	Firm/Company			
		Firm/Company			
	1076 NE	98 TH STREET			
		Address	·		
	Margari (City/State and Zip Code			
	E mail address: (1)	be used for future annual report notific	ation)	· 🕉	
For further information con	ncerning this matter, please ca		arrony	CT 25	
Name of	Person	at (2 11) Daytime '	シラップ Felephone Number	C ## 9: 05	Y DE STATE
Enclosed is a check for the	following amount:				S
□ \$25.00 Filing Fee	図 \$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:

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

AREARIN LL	C
(Name of the Limited Liability Co	ompany as it now appears on our records.) iited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number <u>1 19ゆゆ 238252</u> .	pany were filed on $9/20/2019$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES:	<u>s</u>
	<u></u>
	27 - 128 27 - 128
Enter new mailing address, if applicable:	න
(Mailing address MAY BE A POST OFFICE BOX)	
•	
	\$ 55°
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	d office address on our records, <u>enter the name of the new</u> <u>here</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:

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

<u>Title</u>	Name	Address	Type of Action
<u>MGK</u>	Lyce an Armorros	1076 N=98 STREET	X Add
		concern shorts, FL 33	<i>F</i>
			Change
			Add
			Remove
			Change
			
			□ Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change
			Add
			□ Remove
			Change

	
(If an effective Note: If t	date, if other than the date of filing: (optional) (optional) we 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a seffective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o th day after the record is filed.
	ν': τ
Dated	
Dated	$\frac{-512}{2}$
Dated	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00