L19000 253365

(Requestor's Name)
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PICK-UP WAIT MAIL
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	Registration Se Division of Cor				·	
oun tra	MATTRES	S BY APPOINTMENT OF FL	20			
SUBJEC	.1;	Name of Lim	ited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		-0, -1, -1, -1, -1, -1, -1, -1, -1, -1, -1	, ·
		ondence concerning this matter			E)	. <u>.</u>
			Name of Person			
		SOUZA'S TAX & ACCOU				
			Firm/Company			
		6239 EDGEWATER DR S	STE DOI			
			Address			
		ORLANDO, FL 32810				
		INFO@SOUZTAX.COM	City/State and Zip Code			
		•	to be used for future annual	report notifies	ation)	
For furth	er information c	oncerning this matter, please co	all:			
RICKY	SOUZA		321 89.	5-4099		
	Name o	f Person	Area Code	Daytime T	Telephone Number	
Enclosed	l is a check for t	he following amount:				
■ \$ 25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee of Certified Copy (additional copy is enc		S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Division of C P.O. Box 633	Section Corporations	Divisio	ddress: ation Secti n of Corpo ntre of Tal	orations	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

T	O		
ARTICLES OF C	RGANIZATION		
O	F		
			~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
MATTRESS BY APPOINTMENT OF FLORIDA LI			ゝ ゛ :
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	nv as it now appears on our re- liability Company)	<u>cords.</u>)	and assigned
he Articles of Organization for this Limited Liability Company	were filed on 10/18/2019		and assigned حربكا
Torida document number <u>L 19000253365</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "	LLC" or the abbrevia	ntion "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
 If amending the registered agent and/or registered office agent and/or the new registered office address here: 	iddress on our records, <u>en</u>	ter the name of t	the new registered
gent and/or the new registered office address here.			
Name of New Registered Agent:			
Name of New Registered Agent.			
New Registered Office Address:	Enter Florida street ad		
	 Ciry	, Florida	p Code
iew Registered Agent's Signature, if changing Registered Agent:	•	7-1	y Cina
hereby accept the appointment as registered agent and agrowsisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pering filed to merely reflect a change in the registered office ompany has been notified in writing of this change.	performance of my duties provided for in Chapter 60	i, and Lam famil. 05, F.S. Or, if thi	iar with and is document is
ompany neo ocen noapea in strumg of this enauge.			

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>	Address	Type of Action
MGRM	Giselle Gomez	8508 Blue Horizon Ct.	
		Kissimmee, FL 34747	□Remove
			□Change
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
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			🗆 Add
			□Remove
			Change
			□Remove
			□Change

Effective date, if other than the date of filing: '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. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to occument's effective date on the Department of State's records. The opening a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the distilled. Signature of a member of authorized representative of a member.		
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Pated 2 14 2020 Signature of a member of authorized representative of a member	iote: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
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