119000 262 578

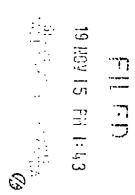
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



600336622426

11/15/19--01024--001 **25.00



TSCHROEDER

COVER LETTER

_	stration Sec sion of Corp			
SUBJECT:	181,	e Enterpris	e 82LLC	
		Name of Lir	nited Liability Company	
The enclosed	Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return a	all correspon	ience concerning this matter	to the following:	
	·	Ма	Name of Person	211
	į	Blue E	Firm/Company	LLC
;	•	5981 P.	Address	
		BOYNTON	Beach FC City/State and Zip Code 82@hotmail.co to be used for future annual report note	33472
		Ocomell_ E-mail address: (82 @ hormail.	fication)
For further info	ormation con	cerning this matter, please ca	alt:	
Marsh	19 OCO	mell	at (<u>S6 </u>) <u>2 (2 -</u> Area Code Daytim	3844
.1	Name of P	urson	Area Code Daytim	e Telephone Number
Enclosed is a c.	heck for the i	ollowing amount:		
\$25.00 <u>Fili</u>	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fec, 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, Ft. 32301

. 0

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)				
The Articles of Organization for this Limited Liability Company we Florida document number	ere filed on 10 18 19 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability	v company here:				
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation "LLC"				
Enter new principal offices address, if applicable:	——————————————————————————————————————				
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5 PH D				
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our records, enter the name of the new				
Name of New Registered Agent:					
New Registered Office Address:					
Negasered Office Address.	Enter Florida stree: address				
. : , Florida,					
	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 = M \\ AMBR = A $	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
AMBR.	Marsha Oconnell	5981 Partual & Dr Boynnon Beach FL 3347	Add
}		Boynnon Beach FL 3347	Z Remove
, 1	•		☐ Change
			🗆 Add
ı			□ Remove
! :			
•			Change
			□ Add
			Remove
·.			U Change
· · · · · · · · · · · · · · · · · · ·		:	Adri J
			☐ Romove
; !			Change
			🗆 Add
			D Remove
			D Change
 :			
			Remove
;			

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
		<u>.</u>
		-
		-
	····	_
	19	
	707	
<u> </u>		- 1
<u> </u>	U)	-
		ر _{سہ} ۔
	ت :	
E. Effective date, if other than the date of filing: (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.) Pursuan Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	u to 605.0 be listed	0207 (3)(b) d as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the (b) The 90th day after the record is filed.	earlie	r of:
Dated		
- Marsha O'Connell		

Page 3 of 3

Filing Fee: \$25.00