L190CC 263458

(Requestor's Name)	
BOYNTON BEACH, FC 33426	900341706899
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	
(Business Entity Name)	03/23/2001013010 *x25.00
(Document Number) Certified Copies Certificates of Status	2020 HAR 2
Special Instructions to Filing Officer:	FILED 2020 HAR 23 AHII: 36

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Amend

APR 07 TOTAL ALBRITTON

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

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ARTIC	CLES OF C	DRGANIZATION	
	O	F	ecords.
Work Hard Dr	zom Bi	9 L L C	The state of the s
Work Hard Die	Liability Compa A Florida Limited	us as it now appears on our r Liability Company)	ecords.)
			1000
The Articles of Organization for this Limited Lia	bility Company	were filed on10 12	2 2019 and assigned
Florida document number 1900.	2634	5%	•
Obj.			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	the limited liab	ility company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:	'7 Housthans	Lane
(Principal office address MUST BE A STREET		Parata Ra	D 17
(Fracqua office adaress sites) BE A STREET	,4DDRL569	3340/	Lane
Parameter Manager Manager			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u>0x)</u>		
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D. 16 P. 11	1 %-		and the state of t
B. If amending the registered agent and/or regagent and/or the new registered office address		address on our records, <u>c</u>	nter the name of the new registered
Name of New Registered Agent:	Sar	tra Radrian	7
	(020	2 0 0	1
New Registered Office Address:	6230	O. UXIC TIC Enter Florida street	JAUCY Iddress
	West Pol	m Reach	Florida <u>33405</u>
	_1_4	City	Zin 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 Type of Action Title Name **Address** Essica Sorchez ______ □Add 300 S Australian Ave Apr. 322 Seemove ____ □Change Sandra Rodriquez 6230 S. Dixie Highway, WPB, FLXIANDI □Remove _____ □Remove _____ □Remove _____ □Change □Add _____ □Remove

_____ □Change

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). 11 ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<u>Note:</u>	ive date, if other than the date of filing: MO(Ch 16, 2000 (optional) (ective 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Signature of a hember or athorized representative of a member
	Typed or printed name of signee

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