119000263507

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration : Division of C		• •	
Evolve So	ocial Project	,	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Articles of Amendment and fee(s) are submitted for filing. Articles of Amendment and fee(s) are submitted for filing. All correspondence concerning this matter to the following: Dina Rios		
Please return all corres	pondence concerning this matter	to the following:	
	Dina Rios		
		Name of Person	
		Firm/Company	
	4906 Cains Wren Trail		
	-	Address	
	Sanford/FL 32771		
	• •		fication)
For further information	concerning this matter, please c	all:	
Dina Rios			
Name	e of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addi Registration		<u>Street Address:</u> Registration Se	ction
	Corporations	Division of Cor	

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

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

evoive S		LLC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000263507}{L19000263507}$	were filed on $\frac{\sqrt{0-3}}{-}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil		" or the abbreviation EL.C."
Enter new principal offices address, if applicable:	8538 Amber Oak Drive	ALL AR
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32817	<u> </u>
		SS. P
Enter new mailing address, if applicable:	8538 Amber Oak Drive	PH 12: 27
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, Fl. 32817	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres:	· · · · · · · · · · · · · · · · · · ·
	, Flo	orida
	City	Zıp 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

<u>Title</u>	Name	Address	Type of Action
MGR	Dina Rios	4906 Cains Wren Trail	
		Sanford, FL 32771	= Remove
			□Change
MGR	Dina Rios	8538 Amber Oak Drive	Add
		Orlando, FL 32817	□Remove
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Remove
			☐ Change
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active data if other t	han the date of filin	03/16/2020		(ontional)	
n effective date is listed, the te: If the date inserted i cument's effective date of	n this block does not r	meet the applicable st	of filing or more than 9 auttory filing require	(optional) 0 days after filing.) Pursuant ments, this date will not b	to 605.0207 be listed as
ecord specifies a delayed is filed.	effective date, but not	t an effective time, at	12:01 a.m. on the ea	rlier of: (b) The 90th da	y after the
March 13		2020			
ted					

Filing Fee: \$25.00