

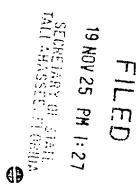
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900337305099

11/25/19--01024--010 **25.00



T. Southworker Little

COVER LETTER

	Registration So Division of Co						
SUBJEC		U ENTERPRISES LLC					
SUBJEC	.1:	Name of Lim	ited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all corresp	ondence concerning this matter	to the following:				
		ERIC WHITE					
			Name of Person				
		EDUBBAU ENTERPRISI	ES LLC				
			Firm/Company				
	5951 6TH WAY S						
		Address					
		ST PETERSBURG, FL 33	705				
			City/State and Zip Code				
		SMASHEDINK2213@YA E-mail address: (HOO.COM to be used for future annual report notific	cation)			
For furth	er information o	concerning this matter, please ca	all:				
ERIC W	ніте		727 224-0019				
	Name (of Person	at ()Area Code Daytime	Telephone Number			
Enclosed	is a check for t	he following amount:					
\$2 5.0	00 Filing Fee	☐ \$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)			
		ING ADDRESS: ration Section	STREET/COURIE Registration Section				

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim		any as it now appears on our r Liability Company)	ecords.)
The Articles of Organization for this Limited lorida document number L19000267144	Liability Company	were filed on	and assigned
This amendment is submitted to amend the fo	llowing:		
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 Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
inter new principal offices address, if appl	icable:	ERIC WHITE	58. Se
Principal office address MUST BE A STREET ADDRESS)		5951 6TH WAY S	20 NO 71
		ST PETERSBURG, FL 3	3705 SS № =
Inter new mailing address, if applicable:		ERIC WHITE	
Mailing address MAY BE A POST OFFICE	E BOX)	5951 6TH WAY S	形 2 2
		ST PETERSBURG, FL 3	3705 (D:
If amending the registered agent and egistered agent and/or the new registered of Name of New Registered Agent:	d/or registered of office address her ERIC WHITE	ffice address on our red <u>e</u> :	cords, <u>enter the name of t</u>
New Registered Office Address:	5951 6TH WA	Y S Enter Florida street a	address
	ST PETERSBU		_, Florida
		City	, FIOFIUA

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>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			Change
			□ Add
			Remove
			Change
			C Remove
			Change
			7. □ Add
			Add Remown SR 25
			C Change
			■ Remove
			Change
			☐ Remove
			Change

	Σω
	9 NON ——————————————————————————————————
	V 25
	# # 1
	1: 2 1: 2
	dp ==
ffective 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 filir	(optional)
lote: If the date inserted in this block does not meet the applicable statutor ocument's effective date on the Department of State's records.	y filing requirements, this date will not be listed a
e record specifies a delayed effective date, but not an effect The 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlier of
NOVEMBER 18 , 2019	
Signature of a member or authorized representation	intative of a member

Page 3 of 3

Filing Fee: \$25.00