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ALLAHASSEE, FLORIDA

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## **COVER LETTER**

	Registration Se Division of Cor			
STID IEC	***	erprises, LLC: Articles of An	nendment	
SUBJEC	· I ·	Name of Lim	ited Liability Company	
The enck	osed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Jason B. Onacki		
			Name of Person	
			Firm/Company	
		3825 Lynn Ora Drive		
		<del></del>	Address	<del></del>
		Pensacola, FL 32504		
		onackienterprises@gmail.co	City/State and Zip Code	
			to be used for future annual report noti	fication)
For furth	er information c	oncerning this matter, please c	all:	
Jason B.	Onacki		850 384-9273 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for the	he following amount:		
□ \$25.0	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)
	Mailing Addres Registration (	Section	<u>Street Address:</u> Registration Se Division of Cor	

P.O. Box 6327 Tallahassee, FL 32314

 $(\mathbf{r}_{i}, \dots, \mathbf{r}_{i}) = (\mathbf{r}_{i}, \dots, \mathbf{r}_{i}) \in \mathcal{F}_{i}$ 

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

띯

Onacki Enterprises, LLC		二二 二
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our record a Limited Liability Company)	EB - EB
The Articles of Organization for this Limited Liability C	Company were filed on October 28, 2019	ල්ලික් රා ගුලික්d assigned M
Florida document number L19000268948	<u> </u> .	Elegan R
This amendment is submitted to amend the following:		B-3 signed B-3 signed Allas Sterr Convolution
A. If amending name, enter the new name of the lim	ited liability company here:	
Onacki Enterprises, PLLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		- <u></u>
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
Negistered office (Address).	Enter Florida street addres.	S
	. Flo	orida
<del></del>	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:

or remov	ea trom our recorus:		
MGR =	Manager		

AMBR = A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Add
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bativa data if	other than the date of	f filings		tontic	.nal)
<u>te:</u> If the date ii	sted, the date must be speci serted in this block does the date on the Departmen	s not meet the appl	icable statutory filis	nore than 90 days after ng requirements, this	mal) tiling.) Pursuant to 605.020 date will not be listed a:
ecord specifies a s filed.	delayed effective date, b	out not an effective	time, at 12:01 a.m.	on the earlier of: (b	The 90th day after the
ed	January 28	. 2020			
	164	HA	- -		
	// Signatur	e of a member or aut	thorized representativ	e of a member	