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(R€	equestor's Name)	
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Amend ch8

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Division of C	orporations				
REID I	LAW, PLLC <u>;</u>				
SUBJECT:	N Clin	·	· · · · · · · · · · · · · · · · · · ·		
	Name of Lin	nited Liability Company	•		
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Ramone Reid	ū			
	-	Name of Person	- LIL		
	Reid Law, PLLC				
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	<del></del>		
	4805 Purdue Drive				
		Address			
	Boynton Beach, FL 3	33436			
	пеid.legal@gmail.com	City/State and Zip Code			
		to be used for future annual report noti	fication)		
For further information	concerning this matter, please c	all:			
Ramone Reid		561 5065433			
		at ()			
Name	of Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for	the following amount:				
■ \$25.00 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 Addr		Street Address:	ati an		
Registration Section Division of Corporations		•	Registration Section Division of Corporations		
P.O. Box 63	27	The Centre of T	•		
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810		

Tallahassee, FL 32303

TO:

**Registration Section** 

## IU ARTICLES OF ORGANIZATION OF

ART	I CLES OF O	RGANIZATIO	N Page 1999 Page 1990 Page 1990 Page 1990 Page 1990 Page 1990 Page 1990 Page
REID LAW, PLLC			1974.
(Name of the Lim	ited Liability Compar (A Florida Limited L	ny as it now appears on clability Company)	our records.)
The Articles of Organization for this Limited I	Liability Company	were filed on	2019 and assigned
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited lighi	lity company here:	
The Reid Law Firm, PLLC.	or the innited habi	my company mere.	
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	1530 W Boynton Beach Blvd	
(Principal office address MUST BE A STREET ADDRESS)		Boynton Beach, FL 33424	
	······································	#4416	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 4416	
		Boynton Beach, FL 33424	
B. If amending the registered agent and/or agent and/or the new registered office addr		ddress on our record	ls, enter the name of the new registered
Name of New Registered Agent:	Ramone Reic	d	
New Registered Office Address:	1530 W Boynto	on Beach Blvd #4416	
	Boynton Beach	Enter Florida sti	reet address 33424
	Boymon Beach	City	, Florida

## 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

		_

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	RAMONE REID	1530 W Boynton Beach Blvd #4416 Boynton Beach, FL 33424	≣ Add
		3527 SW 20th Ave Apt 113 Gainesville, FL 32607	■Remove
			□Change
	-		
			□Remove
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			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. May 28 2020 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member

Typed or printed name of signee

RAMONE REID