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COVER LETTER

TO: Registration Section Division of Corporations

San Marco X, LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juliya Moody

Name of Person

Bookkeeping & Accounting of FI Inc

Firm Company

9905 Old St Augustine Rd Suite 501

Address

Jacksonville, FI 32257

City/State and Zip Code

jmoody@banda-cpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juliya Moody _______at (_____) __________Area Code _______Daytime 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)

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<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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	OF AMENDMENT TO DF ORGANIZATION OF	
SAN MARCO (Name of the Limited Liability C (A Florida Lu	Z, LLC Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number <u>L20000004560</u>	npany were filed on <u>1/7/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	<u>l liability company here</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the a	obreviation "L.t.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	
	·	
Enter new mailing address, if applicable:	<u> </u>	$\langle \rangle$
(Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:		211
New Registered Office Address:	Enter Florida street address	
	, Florida, Chy	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.

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Fitle</u>	Name	Address	Type of Action
MGR	Imad Din	1655 Prudential Dr 2347, Jacksonville, Fl 32207	L Add
			Remove
			IChange
			🗆 Add
			URemove
			Change
			Add
		_,	[]Remove
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		, <u></u> ,,,,	IAdd
			🗌 Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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(If an effective 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)(b) <u>Note:</u> 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.

July 30	203	21	
	1/1 m		
	- Autor	1/ (10-0) X	
		er or authorized representative of a member	
Juliya Moody			
	Туре	ed or printed name of signee	