## L20000/7361

(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:	





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## **COVER LETTER**

TO: Registration Se Division of Corp			
SUBJECT: COM	fort Above & Be	yand lic	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Oscar Caba	th	
	Comfort Abov	FinwCompany	iL
		Firm/Company	
	312 Partrid	ge Plu Lane Address	
		Address	
	Ococe	FL 34761	
		FL 34761 City/State and Zip Code above @ gmaile	<del> </del>
	comfort	above @ gmaile	lom
	E-mail address: (t	o be used for future annual repo	rt notification)
For further information co	oncerning this matter, please ea	dl:	
Dear 1	ahun	at (407) SZ	00 - 9912
OSCAR (	f Person	Area Code D	Paytime Telephone Number
Enclosed is a check for th	ne following amount:		
√ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Addre</u> Registratio	
Division of C			f Corporations
P.O. Box 632	-		of Tallahassee

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Li	mited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Con Florida document number L2000017361.	npany were filed on	24   2020	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here	<u>:</u>	
The new name must be distinguishable and contain the words "Limited	Liability Company," the desi	gnation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	40-		
(Principal office address MUST BE A STREET ADDRES	<u></u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our reco	ords, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida	street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:		
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	aplete performance of m nt as provided for in Ch	y duties, and I am fa apter 605, F.S. Or, i	miliar with and f this document is

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>	<u>Address</u>	Type of Action
<u>AMBR</u>	O'Neill Pierre	312 Partridge Pra Ln Ocole, FL	□Add
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	r than the date of fi	(	21/24/2	1020	10	ptional)	
effective date is listed,	, the date must be specific	and cannot be p	rior to date of fil	ing or more t	han 90 days :	after filing.) P	ursuant to 605.020°
e: If the date inserte ument's effective da	ed in this block does nate on the Department	ot meet the app of State's record	olicable statuto rds.	ry filing re	quirements.	this date wi	ll not be listed as
cord specifies a dela	yed effective date, but	not an effectiv	e time, at 12:0	l a.m. on tl	he earlier of	f: (b) The 9	Oth day after the
s filed.							·
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Filing Fee: \$25.00