

L20000029316

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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED  
2020 OCT 13 PM 4:41

NOV 17 2020

S. YOUNG

Registration Section  
Division of Corporations

SUBJECT: 4219, LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

CHRISTY STROSS  
Name of Person

\_\_\_\_\_  
Firm/Company

6505 Central Ave  
Address

St. Petersburg, FL 38710  
City/State and Zip Code

cbstross@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTY STROSS at 813 464-4644  
Name of Person 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)

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION  
OF

4219, LLC

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

2020 OCT 13 PM 4:41

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Articles of Organization for this Limited Liability Company were filed on JAN 23 2020 and assigned  
document number L20000029316

amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

If new principal offices address, if applicable:  
Principal office address MUST BE A STREET ADDRESS

6505 Central Ave  
St. Petersburg, FL 33710

If new mailing address, if applicable:  
Mailing address MAY BE A POST OFFICE BOX

3963 Bayshore Blvd NE  
St. Petersburg, FL 33703

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

CHRISTY STROSS

New Registered Office Address:

6405 Central Ave

Enter Florida street address

St. Petersburg

Florida

33710

City

Zip Code

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

R = Manager  
BR = Authorized Member

	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GK	Brinks, LLC	111 2nd Ave NE	<input type="checkbox"/> Add
		St. Petersburg, FL 33701	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
BR	KJ Brinks, LLC	6450 Central Ave	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33710	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

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)

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.

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 document is filed.

Effective date: 10/7/20 2020

Handwritten signature of Chrisy Stross

Signature of a member or authorized representative of a member

CHRISY STROSS

Typed or printed name of signee