L20000040169

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Na	me)
(Dc	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200346846942

06/39/26 -01/...d 0.7 **.*..06

RECEIVED
JUN 2 9 2020



COVER LETTER

Registration Section
Division of Corporations

TO:

Amend Aut	thorized Person Detail	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	Andrew M Patten		
		Name of Person	
	APLUSDEALZ.COM LLC	3	
		Firm/Company	
	4180 NW 45 ST		
		Address	·-
	LAUDERDALE LAKES,	FL 33319	
		City/State and Zip Code	
	pattenptk@gmail.com		
	E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
Andrew M. Patten		305 495-5299 at ()	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 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 S Division of C	Section Corporations	Street Address: Registration S Division of Co	orporations
P.O. Box 632		The Centre of	
Tallahassee, l	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303



2020 711 21 3

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2020

ANDREW M PATTÉN 4180 NW 45 ST LAUDERDALE LAKES, FL 33319

SUBJECT: APLUSDEALZ.COM LLC

Ref. Number: L20000040169

We have received your document for APLUSDEALZ.COM LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 320A00015213

Rebekah White Regulatory Specialist II Supervisor

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

APLUSDEALZ.COM LLC

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

(A Florida Limited	Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000040169</u>	y were filed on $\frac{02/03/20}{}$	020	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designa	tion "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		****	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	is, <u>enter the name of</u>	the new register
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida sti	reet address	
	City	, Florida	p Code
New Registered Agent's Signature, if changing Registered Agent	<u>l:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	e performance of my a	luties, and I am famid	iar with and

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
CEO	ANDREW M. PATTEN	4180 NW 45 ST, LAUDERDALE LAKES, FL 33319	9 □Add
			/≣Remove
			□Change
MGR	ANDREW M. PATTEN	4180 NW 45 ST, LAUDERDALE LAKES, FL 33319	9 ≡ ∧dd
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□ Change

		
		<u> </u>
1		***************************************
4-14-1		
ffective date, if other than th	e date of filing:	(optional)
an effective date is listed, the date m	ust be specific and cannot be prior to dat block does not meet the applicable	e of filing or more than 90 days after filing.) Pursuant to 605.020 statutory filing requirements, this date will not be listed a
ocument's effective date on the		matutory iming requirements, this date with not be fisted a
record specifies a delayed effect	ive date, but not an effective time :	t 12:01 a.m. on the earlier of: (b) The 90th day after the
l is filed.	To date, but not an entoure imo, e	. 12.01 a.m. on the carrier on (a) - 110 your cay area
June 24th ated	2020	
ated		
	Know do 1 D.	
		representative of a member

Typed or printed name of signee