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COVER LETTER

TO:

TO: Registration Division of C	Section Corporations	
7	R. A. L.	
SUBJECT: <u>U</u>	Name of Limited Liability Company	_
The enclosed Articles	of Amendment and fee(s) are submitted for filing.	
Please return all corre	spondence concerning this matter to the following:	
	Christopher M Bisso Name of Person	
	Firm/Company	
	974 Wichpark dr. Unit B	
	Celebration FL 3474	1_
	E-mail address: (to be used for futured in und report notification)	
For further informatio	n concerning this matter, please call:	
Chris	at (813) 210 - 7741 e of Person Area Code Daytime Telephone Nu	
Nan	e of Person Area Code Daytime Telephone Nu	mber
Enclosed is a check fo	r the following amount:	
\$25,00 Filing Fee	Certificate of Status Certified Copy Cert (additional copy is enclosed) Certified Copy	00 Filing Fee, ifficate of Status & iffed Copy tional copy is enclosed)
P.O. Box 6	n Section Registration Section Corporations Division of Corporations	te 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Con (A Florida Limite	npany at it now appears on our records.) red Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>LZOOOGGAZS7</u> .	any were filed on 2/12/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited		reviation "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)		·
		4
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, enter the name	of the new registered
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			\ \ \ _Add
		····	□Remove
			□Change
			□Add
			□Remove
		····	□Change
			🗆 Add
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			Change
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			□Change
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		🗆 Add	
			□Remove
			□(Chango

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lf an effecti <u>Note:</u> Hi	date, if other than the date of filing:
30cument	Es effective date on the Department of State's records.
e record s rd is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	April 14. 2021. Chris Buse
	NIVER TO
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00