L20000068252

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C. GOLDEN SEP 22 2020

COVER LETTER

				gistration Sect rision of Corpo	
			g Futures LLC	Blossoming F	CUD ITCT
	ed Liability Company	Name of Limited Lia			SUBJECT
	nitted for filing.	fee(s) are submitted	Amendment and	d Articles of Ar	The enclos
	o the following:	ng this matter to the f	ondence concernin	i all correspond	Please retu
		ene G. Cohen	MaryMagdale 		
	Name of Person	ì			
		futures LLC	Blossoming F		
	Firn/Company				
	01	ite Blvd Apt. 101	6860 Southga		
	Address				
		33321	Tamarac, FL		
	City/State and Zip Code	•			
			•		
	·		concerning this ma	nformation con	For further
	754 600-7586		en	ilene G. Cohen	MaryMago
	Area Code Daytime Telephone Number		of Person	Name of F	
		unt:	he following amou	a check for the	Enclosed is
of Status &	(additional copy is enclosed) Certified	e of Status	■ \$30.00 Filin Certificate	Filing Fee	□ \$25.00
	Street Address: Registration Section			uiling Address:	
	Division of Corporations		Corporations	vision of Co	D
0	The Centre of Tallahassee			D. Box 6327	
e of Sta Copy opy is er	be used for future annual report notification) II:	City/gdalene@gmail.commail address: (to be us atter, please call: unt: ng Fee & c of Status	cohenmaryman E- concerning this mater of Person he following amout \$30.00 Filin Certificate Section Corporations 27	Name of F Name of F a check for the Filing Fee Gilling Address: Gistration Se vision of Con	MaryMago Enclosed is □ \$25.00

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

277 - 4 PM 3:31

Blossoming Futures LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited	iny as it now appears on our recor Liability Company)	<u>-ds.</u>)
The Articles of Organization for this Limited Li Florida document number L20000068252	ability Company	were filed on 03/02/2020	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		6860 Southgate Blvd Apt 101	
(Principal office address MUST BE A STREE	T ADDRESS)	Tamarac, FL 33321	
Enter new mailing address, if applicable:		6860 Southgate Blvd Apt 101	
(Mailing address MAY BE A POST OFFICE BOX)		Tamarac, FL 33321	
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:			
New Registered Office Address:	6860 Southgate	: Blvd Apt101	
To the state of th		Enter Florida street addre	ess
	Tamarac	. F	lorida <u>33321</u>
		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.

It Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MaryMagdalene G. Cohen	6860 Southgate Blvd Apt 101	≘ Add
		Tamarae, FL 33321	□Remove
			☐ Change
AMBR MaryMagdalene G. Cohen	MaryMagdalene G. Cohen	6860 Southgate Blvd Apt 101	= Add
	Tamarac, FL 33321	□Remove	
		□Change	
		□Add	
		□Remove	
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T. 0.0	07/30/20
f an effec <u>Note:</u> 1	tive date, if other than the date of filing:
record d is file	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 d.
Dated _	aly 30 2020
	W/ and W/A
	//////////////////////////////////////
	, Signature of a incliner of authorized representative of a member

Filing Fee: \$25.00