## L20000086809

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## **COVER LETTER**

TO: Registration Secti Division of Corpo			
SUBJECT:	(Jenom:	e LLC	
30B0EC1.	Name of Lim	ited Liability Company	·····
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
		Name of Person	
		Tenome LL	<i>/</i>
	4217	Firm/Company Adams St	
	Hollyw	Address  Odd 133  City/State and Zip Code	021
	E-mail address: (	be used for future annual report notific	ome-11c. Com
For further information con-	cerning this matter, please ca	all:	
Name of P	UNDS erson	at (718) 710 Area Code Daytime	0.3.13 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:	ction	Street Address:	tion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Czeno	me ILC = = T
	company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com	pany were filed on 20170 2020 and signed
Florida document number <u>L 2 0000815809</u>	
This amendment is submitted to amend the following:	المراجع
A. If amending name, enter the new name of the limited	l liability company here:
	Na
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Na
Principal office address MUST BE A STREET ADDRES	(S)
Enter new mailing address, if applicable:	n(a
Mailing address MAY BE A POST OFFICE BOX)	
<u> </u>	
<ol> <li>If amending the registered agent and/or registered of agent and/or the new registered office address here:</li> </ol>	fice address on our records, enter the name of the new registered
Name of New Decision 1.6	12 C
Name of New Registered Agent:	10.00
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 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
AMBR	ERB Genome	4217 AdamsSt	ÞÁdd
		Holly wood, Fr. 33021	□Remove
	do		Change
			□Add
	(		□Remove
			□Change
MBR	Lujin	2300 N. Dean Blvd Ft.) auderdale, F. 333	DAdd
	(Genome LLC	H. Jauderdale, 92 533	_ □ Remove
			□Change
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			□Remove
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	<del></del>		🗆 Add
			□Remove
			Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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Effectiv	re date, if other than the date of filing:
Note: 1	ctive date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docume	nt's effective date on the Department of State's records.
e 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
rd is file	d.
Dated _	01/19/2020.
	Signature of a member or authorized representative of a member
	1 I Same
	Typed or printed name of signee