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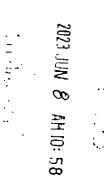
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A. PARISHANI

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations POM MANAGEMENT, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: TIFFANEY STERLING Name of Person Firm/Company 7770 NW 50TH ST #508 Address LAUDERHILL FL 33351 City/State and Zip Code TIFFANEY.STERLING1@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tiffany Sterling Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee. ☐ \$55.00 Filing Fee & ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our re Liability Company)				
he Articles of Organization for this Limited L lorida document number 1.20000097045	and assigned					
his amendment is submitted to amend the fol			S N			
If amending name, <u>enter the new name c</u>	of the limited liab	ility company here:	AH 10:			
ONDO ADVISORS OF FLORIDA, LLC						
he new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation "	LLC" or the abbreviation "L.L.C."			
nter new principal offices address, if appli	cable:	1704 NW 56TH AVE				
Principal office address MUST BE A STREET ADDRESS)		LAUDERHILL FL. 33313	•			
nter new mailing address, if applicable:		1704 NW 56TH AVE				
Mailing address MAY BE A POST OFFICE BOX)		LAUDERHILL FL. 33313				
 If amending the registered agent and/or gent and/or the new registered office addre 		address on our records, <u>er</u>	nter the name of the new regist			
Name of New Registered Agent:	TIFFANEY ST					
New Registered Office Address:	1704 NW 56TI					
		Enter Florida street ac				
	LAUDERHILL	-	Florida 33313			

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, and <u>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
MGR	MELROY STERLING	5732 NW 16TH ST .	
		LAUERHILL FL 33313	■Remove
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an elle <u>ote:</u> I	ctive date is list I'the date inse	ed, the date muserted in this bl date on the D	a be specific an ock does not	id cannot be p meet the apj	rior io dale oi olicable statu	nung or more tr	an 90 days at	er filing.) i	Pursuant to 605 ill not be list	5.0207 ed as
record is file		elayed effectiv	e date, but no	ot an effectiv	e time, at 12	:01 a.m. on th	e earlier of:	(b) The	90th day afte	r the
ned_	June	Sh		. 200	13.					
	(Tuff!								
			Signature of a	member or a	uthorized repr	esentative of a	member			
		Y STERLING		member or a	uthorized repr	esentative of a	member			

Filing Fee: \$25.00