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COVER LETTER

Registration Section
Division of Corporations

Tallahassee, FL 32314

35 CH. J. S

TO:

	OUTDOOR LIVING LLC		
SUBJECT:	Name of Lim	ited Liability Company	
			بے
			Sold State of the
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	غيرة في
Please return all correspo	ondence concerning this matter	to the following:	∵
	Raquel B. Mowrer		
		Name of Person	
	On Target Business Solution	ons LLC	
		Firm/Company	
	7021 Grand National Drive	e suite 100	
		Address	
	Orlando, Fl 32819		
		City/State and Zip Code	
•	raquel@rmontarget.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	•
Raquel B Mowrer		407 745-1706	ov
Name o	f Person		e Telephone Number
Enclosed is a check for the	he 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 Addres		Street Address:	
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632	•	The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

P 36 4 2 1 1 1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

20 12.00 13.50 QUEIROZ OUTDOOR LIVING 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 were filed on 05/08/2020 and assigned Florida document number L20000124875 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

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>	<u>Name</u>	Address	Type of Action
AMBR	Freire de Queiroz, Henrique J	13520 Carroway St Windermere, FL 34786	
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□ Remove
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Effective date, if other than the date an effective date is listed, the date must be seen as a listed of this block of the date inserted in this block of the date on the Department's effective date on the Department.	specific and cannot be prior to c does not meet the applicable	date of filing or more than 90 e statutory filing requirer	(optional) days after filing.) Pursuant to 6 ments, this date will not be l	05.0207 (isted as t
	te, but not an effective time	at 12:01 a.m. on the ear	lier of: (b) The 90th day a	fter the
d is filed.	2020			
vated	2020 A F To anature of a member or authorize	ed representative of a memor	er	

Filing Fee: \$25.00