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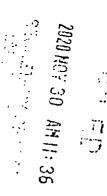
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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- COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	scholog L	LC	
3000001.	Name of Limi	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	$_$ Danr	y <u>ardena</u> Name of Person	5
	G0	choog He	
		Firm/Company	
	4555	Phila del Phia Address	Cir
	Kissimm	e, FL 34B6	
		City/State and Zip Code	
•	E-mail address: (1	to be used for future annual report not	ification)
For further information con	ncerning this matter, please ca	all:	
	0001-005	(107 103	01.0(
Name of f	<u>Cardenas</u>	at (TOT) 405 Area Code Daytir	ne Telephone Number
•			
Enclosed is a check for the	following amount:		
S25.00 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: Registration Se	ection	Street Address: Registration Se	
Division of Co P.O. Box 6327	•	Division of Co The Centre of	•
Tallahassee, Fl			pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	<u> </u>			_	
(Name of the Limited Liability Compan (A Florida Limited Li	<u>iy as it now appea</u> lability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L2000126390</u> .		, ,	20 and	assigned	i
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	ity company h	ere:			
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the	designation "LLC" or th	ne abbreviation	"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)		, <u> </u>	7.7	2020 NOV 30	
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here:	ddress on our i	records, <u>enter the r</u>	iame of the i	few reg	istere
Name of New Registered Agent:					
New Registered Office Address:	Enter Flo	rida street address			
		Florida	1		
	City		Zip Co	de	
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agre-	e to act in this	capacity. I further	agree to co	mply wi	ith 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, enter the title, name, and address of each person being adderest or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Lopez Obrte Erwin	4555 Philadelphia Ci Kissimmee, FL 34746	<u> </u>
	·	Kissimmee, FL 34746	_ TRemove
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****			□Add
			□Remove
			DChange
<u>.</u>			□Add
			□Remove
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			□Remove

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| lf an eff<br><u>Note:</u> | ve date, if other than the date of filing:                                                                                       |
| e recor<br>rd is fil      | d 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 ed. |
| Dated                     | ·                                                                                                                                |
|                           |                                                                                                                                  |
|                           |                                                                                                                                  |
|                           | Signature of a member or authorized representative of a member                                                                   |