## LZ0000127835

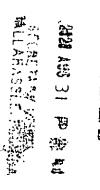
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[7. ...]

## **COVER LETTER**

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations	4 •	
SUBJECT: Fire Rose N	Management LLC		•
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rosela Tincel		
		Name of Person	
	Fire Rose Managment LLC		
	-	Firm/Company	
	1951 NW 185th Ter	-	
		Address	
	Miami Garden, FL 33056		
	info@thefirerose.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Rosela Tincel		at ( 305 ) 542-9371	
Name o	f Person	Area Code Daytim	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 Section		Registration Section Division of Corporations	
Division of C P.O. Box 632	•	The Centre of T	
1 .O. DUX 032	. <i>I</i>	THE CERTIC OF I	ununassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Company  L20000127835  Lorida document number	were filed on May 12, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	- 14 m
		A STATE OF THE STA
Enter new mailing address, if applicable:		771
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, <u>ent</u>	er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		Florida
	City	FloridaZip Code
	o,	

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

Title	<u>Name</u>	Address	Type of Action
MGR	Terry F. Tincel	1951 NW 185th Ter Miami Gardens FL, 33056	■Add
			□Remove
		<del> </del>	□Change
	<del></del>		
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			□Change
			□ Add
		<del></del>	□Remove
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n eff <u>ete:</u>	ve date, if other than the date of filing:
ecore is fil	I 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.
	Aug 25, 2020
ted .	
	Signature of a member or authorized representative of a member