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(Requ	iestor's Name)	<u> </u>
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
		
Special Instructions to Fil	ling Officer:	
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COVER LETTER

TO:

TO: Registration 9 Division of Co					
N60AJ, L	LC				
SUBJECT:Name of Limited Liability Company					
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
	Cheyenne N. Riker				
		Name of Person			
	N60AJ, LLC				
		Firm/Company			
	3951 Haverhill Road, #1	20-121			
		Address			
	West Palm Beach, FL 3	3417			
		City/State and Zip Code			
	riker@rxunited.com		77		
For further information	concerning this matter, please c	to be used for future annual report noti all:	incation)		
Cheyenne N. Riker		561 815-1614			
Name	of Person		te Telephone Number		
Enclosed is a check for	the following amount:				
(12 S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addr Registration		<u>Street Address:</u> Registration Se	ction		
Registration Section Division of Corporations		•	Division of Corporations		
P.O. Box 63		The Centre of T			
	527	The Centre of T			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2007 " " - 3 PM 6: 15

N60AJ, 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	y were filed on May 21, 2020	and assigned
Florida document number L20000138120		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1311 E. Allantic Blvd	
(Principal office address MUST BE A STREET ADDRESS)	Pompano Beach, FL 33060	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter th	e name of the new registered
New Registered Office Address:		
	Enter Florida street address	
مه متعلقه وهندي الرائدة الملك	, Flor	ida
		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is
If Cha	inging Registered Agent, <u>Signature of S</u>	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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
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			□Remove
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(If an effective date is listed, the date i	the date of filing:	irsuant to 605.0207 (3) Il not be listed as the
he record specifies a delayed effectord is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 9	0th day after the
June 1	2020	
/		
	Signature of a member or authorized representative of a member	
	organitie of a memoszor autoorized representative of a member	
Cheyenne N. Riker	, Authorized Representative of N60AJ, LLC	
	Typed or printed name of signee	

Filing Fee: \$25.00