LZ0000139581

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COVER LETTER

Division of Corporations	•
SUBJECT: Angelhart En-	Herprises CCC;
The enclosed Articles of Amendment and fee(s) are submi-	tted for filing.
Please return all correspondence concerning this matter to	the following:
Wanda B	Name of Person
thgelb	Firm/Company
•	West Prospect Road #1212
Tax	narge Fl 33309 City/State and Zil Code ar tenterprises @amail.com be used for future annual report notification)
E-mail address: (to l	artenterprises @amail.com ne used for future annual report notification)
For further information concerning this matter, please call:	
Wanda Bennett Name of Person	at (954) 812 · 4494 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

€2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO:

Registration Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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_	- 0 -	2218	31	R1 7: 58	

(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2000 139581</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabile	······································
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N_1A
(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 a agent and/or the new registered office address here:	
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as poing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and or orovided for in Chapter 605, F.S. Or, if this document is

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 220 A = 31 A 7: 38	Type of Action
CEO	Wanda Bennett	2851 West Prospect Road Tamarac, F1 33309	1212 X Add
		Tamarac, Fl 33309	□Remove
			Change
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satina	date, if other than the date of filing: (options	al)
effecti	we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing	ng.) Pursuant to 605.0
<u>e:</u> If t ument	he date inserted in this block does not meet the applicable statutory filing requirements, this days effective date on the Department of State's records.	ite will not be fisted
_	necifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after t
s filed.		
	08/27/2020 1300	
ed	08/2/2020	
	1 Mannatt	
	Signature of a member or authorized representative of a member	
	DINAMAR BENNETT / Wanda Bennett	
	1) Naur om ust / Wanga Dennet	