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(Requestor's Name) (Address)	900346094
(Address)	3003-003-
(City/State/Zip/Phone #)	06/12/20010110
(Business Entity Name)	
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то:	Registration So Division of Co							
emp nez		k Holdings LLC						
SUBJEC	.l:	Name of Lim	ited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please re	eturn all correspo	ondence concerning this matter	to the following:					
		Shawna Schoenbeck						
		**	Name of Person					
		Schoenbeck Holdings LLC						
			Firm/Company					
		867 West Bloomingdale A	ve #6336					
		Address						
		Brandon, FL 33508						
		City/State and Zip Code						
		shawna@schoenbeckholdin	-	1				
			to be used for future annua	report notifica	ation)			
For turth	ier information o	concerning this matter, please e	att:					
Shawna	Schoenbeck		813 84 at ()	16-8318				
-	Name (of Person	Area Code	Daytime 'I	elephone Number			
Enclosed	d is a check for t	he following amount:						
□ \$ 25.	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy tadditional copy is en		☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Addre Registration		<u>Street A</u> Registr	<u>address:</u> ration Secti	on			
	Division of C		~	on of Corpo				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Schoenbeek Holdings LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Clability Company)	
The Articles of Organization for this Limited Liability Company	were filed on May 26, 2020	and assigned
Florida document number 1.20000142874		
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 Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	302 South Collins Street #513	
(Principal office address MUST BE A STREET ADDRESS)	Plant City, FL 33563-5534	20
		2020
Enter new mailing address, if applicable:		12
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<u> </u>
		<u> </u>
		56
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registered
-		
Name of New Registered Agent:		
New Registered Office Address:	<u> </u>	
·	Enter Florida street address	
	Florida	aZip Code
	City	гар Соае

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
	- -		□Remove
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cord sp s filed.	ecifies a delaye	d effective date.	but not an	effective tir	ne. at 12:01	a.m. on the ca	rlier of: (b)	The 90th day afte	er the
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Filing Fee: \$25.00