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COVER LETTER

Division of Corporations
SUBJECT: Terry 17. Max LLC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Terry A. MAX. Name of Person
Terry A. MAX LLC. Firm/Company
5222 Windsor Parke
Boca Rata Florida - 33496 City/State and Zip Code
TempAmax& Concil Com E-mail address: (to be used for future annual report notification) Terry Amax & small.
For further information concerning this matter, please call:
Terry MAX. at (847) 3C1-3EE.G. Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: 25.00 Filing Fee Sacretificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Street Address:

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

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w Florida document number <u> </u>	vere filed on May 27, 2070 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Terry A.MAX
(Principal office address MUST BE A STREET ADDRESS)	5222 WILDROT PARKE
	Boca RAton Florida 3349
Enter new mailing address, if applicable:	202
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	Idress on our records, enter the name of the new registered
Name of New Registered Agent: / E 5 5 7	
New Registered Office Address: \$222	A. MAX Cuindsor Pance Enter Florida street address
Boxas	City , Florida 2796
New Registered Agent's Signature, if changing Registered Agent:	Eng.

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>	Name	Address	Type of Action
MGR	Term A. MAX	5222 Windsor Pinte	Xidd
		Boca RAton FloriDA 33496	□Remove
			□Change
AMBR TERMY A. MAX	Terry A. Max	5222 Windfur Parke	} &Add
		Boca FAter Florida	□Remove
		33496	□Change
			□Add
			□Remove
		-17	□Change
			□ Add
			□Remove
			Change
· ·			□Add
			□Remove
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	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: 1	te date, if other than the date of filing:
he record ord is file	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 d.
Dated _	June 11 2020
	Teny A. M. Signature of a member or authorized representative of a member
	Terry A. MAX Typed or printed name of signee

Filing Fee: \$25.00