## L20000 149913

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	<del>/</del> /
PICK-UP WAIT	MAIL
(Business Entity Name	<del>)</del>
(Document Number)	<u> </u>
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## **COVER LETTER**

	Registration Se Division of Cor				
CHD HEC		utions Cell Phone Repair LLC		•	
Name of Limited Liability Company					
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		Mario Cooper			
		-	Name of Person		
Simple Solutions Cell Phone Repair LLC					
Firm/Company					
725 Dr Mary McLeod Bethune Blvd					
			Address		
	Daytona Beach, FL 32114				
			City/State and Zip Code		
		simplecellphonerepair@gm	ail.com		
		E-mail address: (	to be used for future annual report not	ification)	
For furthe	r information c	oncerning this matter, please c	all:		
Mario Cooper		386 506-7503			
Name of Person			ne Telephone Number		
Enclosed i	s a check for th	ne following amount:			
□ \$25.00	0 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 Address: Registration Section		<u>Street Address:</u> Registration Se	ection		
Division of Corporations		<del>-</del>	Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Simple Solutions Cell Phone Repair LLC

2020 J N20 F" 3: 12

(Name of the Lin	nited Liability Company as i (A Florida Limited Liabilit	t now appears on our y Company)	records.)	
The Articles of Organization for this Limited Florida document number L20000149973		filed on	and assigned	
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited liability c	ompany here:		
The new name must be distinguishable and contain the	words "Limited Liability Cor	npany," the designatio	on "L.L.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if app	icable:			
Principal office address MUST BE A STRE	EET ADDRESS)			
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFIC</u>	<u></u>			
<ol> <li>If amending the registered agent and/or igent and/or the new registered office addr</li> </ol>	registered office addresess here:	ss on our records,	enter the name of the new regist	
Name of New Registered Agent:	Simple Solutions Glob	oal Inc.		
	725 Dr Mary McLeod Bethune Blvd			
New Registered Office Address:			<del>_</del>	
New Registered Office Address:	_	Enter Florida street		
New Registered Office Address:	Daytona Beach		address Florida 32114 Zip Code	

## 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, 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	Type of Action
<del></del>			
			□Remove
		<del> </del>	□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Remove
			Change
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_\_\_\_ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. June 17 2020 Dated Signature of a member or authorized representative of a member Mario Cooper Typed or printed name of signee