## L20000156886

(Requestor's Name)			
(Ac	(Address)		
(Address)			
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Dc	ocument Number)		
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Certified Copies	Certificates	of Status	
<b>f</b>			
Special Instructions to	Filing Officer:		

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations	
Sakchess Fox	LLC
SUBJECT: OANDIBU OF.	of Limited Liability Company
The enclosed Articles of Amendment and fee(s) a	re submitted for filing.
Please return all correspondence concerning this r	natter to the following:
/a tasha	Wright
Sakchase	
5337	N. Socrum Loop Rd #280
lakeland	Address
latasha. I	City/State and Zip-Code  What SDL waman. Com  Iress (to be used for future unital report notification)
For further information concerning this matter, ple	ease call;
Latisha Wint	at (407) Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$\alpha\$\$ \$25.00 Filing Fee Certificate of State  \$\alpha\$\$ \$25.00 Filing Fee Certificate of S	
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sakohwer Ent LLC.	2320 NC = 2	2 PN 6: 08
(Name of the Limited Liability Compa (A Florida Limited I.	ny as it now appears on our rollability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number 1200156 186.	were filed on Db /8/	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
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:		
(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:	ddress on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter Florida street a	ddress
		. Florida
	City	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 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

	uthorized Member		
<u>Title</u>	<u>Name</u>	Address 9 No -2 Pi 6: 08	Type of Action
MGA	James C. Jmus	5337 N. Socram len Re	✓ □Add
<del>t</del>		Address No -2 Pi 6:08  5337 N. Socram loop Re  #280  Takeland, H. 33809	Remove
	,		□Change
MGC	Yvonne Wight	5337 N. Socrum loop #280	<b>N</b> Add
			□Remove
		lakeland, TP. 33889	□ Change
			□Add
			Remove
			□Change
		···	□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
		<del></del>	□Change
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	2121 NO -2 PO 6: 08	
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ective date, if other than the date of filing: $/\ell/27$	//nho (optional)	
n effective date is listed, the date must be specific and cannot be prior	(optional)  To date of filing or more than 90 days after filing.) Pursuant to 605,0207	
<u>de:</u> If the date inserted in this block does not meet the applic cument's effective date on the Department of State's records.	cable statutory filing requirements, this date will not be listed as	
sound or sailing a distanced afficiency days that most on afficiency	instant 12/01 many and have discretely a first the code days found a	
is filed.	ime, at 12:01 a.m. on the earlier of: (b) The 90th day after the	
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Later Whit		
Signature of a member or auth	iorized representative of a member	
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