

L20000 160103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

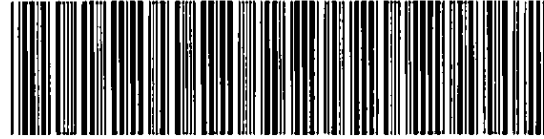
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

2/1/21
Harold German
Advised to file
Amendment as
submitted...!
Field Art IV
To Dic

Office Use Only



500350377175

08/18/20--01023--001 **25.00

Amend

FEB 01 2021
ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SIGMA COMICS, LLC

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:

HAROLD GERMAN

Name of Person

SIGMA COMICS, LLC

Firm/Company

10850 PINES BLVD, PMB #242

Address

PEMBROKE PINES, FL 33026

City/State and Zip Code

sigmacomicsgroup@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harold German

917 397-0574
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 5, 2020

HAROLD GERMAN
10850 PINES BLVD #242
PEMRBOKE PINES, FL 33026

SUBJECT: SIGMA COMICS LLC
Ref. Number: L20000160103

We have received your document for SIGMA COMICS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please specify if our office is removing or changing the information for Harold German.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder
Regulatory Specialist III

Letter Number: 320A00019250

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SIGMA COMICS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/10/2020 and assigned
Florida document number L20000160103.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	HAROLD GERMAN		<input type="checkbox"/> Add
		405 E 16TH ST. APT 6E, BROOKLYN NY 11226	<input checked="" type="checkbox"/> Remove
		10850 PINES BLVD. PMB# 242	<input checked="" type="checkbox"/> Change
		PEMBROKE PINES, FL 33026	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

PLEASE NOTE THAT I HAD TO PUT THE ADDRESS CHANGE ON TWO LINES BECAUSE
OF THE SHORT AMOUNT OF SPACE PROVIDED.

Amended Article IV

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.

Dated remains unchanged at June 10 2020



Signature of a member or authorized representative of a member

HAROLD GERMAN

08/07/20

Typed or printed name of signee