

L20 000 162808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

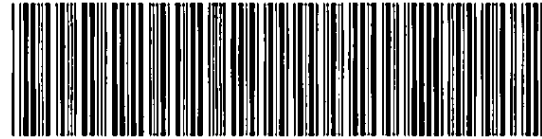
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ALOWYN ENTERPRISE, 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:

ANTHONY F. RYAN

Name of Person

ALOWYN ENTERPRISE, LLC

Firm/Company

15800 PINES BLVD. STE 3156

Address

PEMBROKE PINES, FL 33027

City/State and Zip Code

ADMIN@ALOWYN.COM

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

For further information concerning this matter, please call:

ANTHONY RYAN

Name of Person

954

at ()

Area Code

627-1120

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

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TALLAHASSEE, FLORIDA

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

ALOWYN ENTERPRISE, 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 June 12, 2020 and assigned
Florida document number L20000162808.

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)

15800 PINES BLVD. STE 3156

PEMBROKE PINES, FL 33027

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15800 PINES BLVD. STE 3156

PEMBROKE PINES, FL 33027

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:

15800 PINES BLVD. STE 3156

Enter Florida street address

PEMBROKE PINES

City

Florida 33027

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	ANTHONY F. RYAN	15800 PINES BLVD. STE 3156	☐ Add
		PEMBROKE PINES, FL 33027	☐ Remove
			☒ Change
MGR	CRISTINA CAMACHO	15800 PINES BLVD. STE 3156	☒ Add
		PEMBROKE PINES, FL 33027	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Add
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			☐ Add
			☐ Remove
			☐ Change

2028 OCT -5 PM 3:17
TALLAHASSEE, FL 32310

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FBI
FBI

2020 OCT -5 PM 3:17

(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)

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 September 29, 2020

 Signature of a

Signature of a member or authorized representative of a member

ANTHONY RYAN

Typed or printed name of signee

Filing Fee: \$25.00