L20000 163305

(Re	equestor's Name)		
(Ad	idress)		
(Ad	idress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
		•	

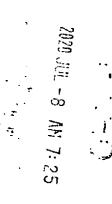




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AUG 1 9 2020 S. YOUNG



COVER LETTER

TO:

ΓO: Registration Sec Division of Corp				
ELIBIECT: BIC	ing Tide s	PENIES LLC	_	
SUBJECT: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Name of Limi	ted Liability Company		
The enclosed Articles of A	Amendment and fee(s) are subt	nitted for filing.		
Please return all correspor	ndence concerning this matter t	to the following:		
	Rick	Name of Person		
		Name of Person		
	Risig	y Tide Service	, LLC	
		Firm/Company		
	16277 SV	J 20th St,		
		Address		
	Missa mas	Florida 3302	.7	
	(1.1.0(1.0.0	Florida, 3302 City/State and Zip Code nelli@Gmail.com		
	Order Inlies	10 li (a) Gravi, com	tification)	
	·			
	oncerning this matter, please ca		,	
Andrew I	uionelli.	at (<u>6\4</u>)	0689	
Name o	f Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for th	ne following amount:		T 40000 PH F	
SS \$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)	
		0		
Mailing Addres Registration S		<u>Street Address:</u> Registration S	ection	
Division of C	Corporations	Division of Co		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
i ananassee,				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rising Tide	- Services 1	_LC	920 J
(Name of the Limited	Liability Company as it now appear Florida Limited Liability Company)	irs on our records.)	
The Articles of Organization for this Limited Liab Florida document number <u>しょののいろろう</u>		JUNC 12,	and assigned -
This amendment is submitted to amend the follow	ing:		0,
A. If amending name, enter the new name of th	e limited liability company h	<u>iere</u> :	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the	designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or regi agent and/or the new registered office address b		records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	<u> </u>		
New Registered Office Address:	Enter Flo	orida street address	
	City	Florida	RZip Code
	City		гір Соае

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
NGB/AMBR	Andrew Iulianelli	16277 SW 20m St	S Add
		Miramar FL, 33027	□Remove
			□Change
MGR	Anna Iulianelli	16277 Su 20th St	□Add
		Miramas Fl, 33027	\(\sqrt{Remove}\)
			🗆 Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
<u> </u>			□Add
			□Remove
			□Change