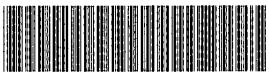
LZO 000 174498

(Requestor's Name)	
(Address)	100350484
(Address)	100000-10-1
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	.i 08/27/2001023
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



291

017 **60.00

OCT 1 0 2020

COVER LETTER

TO: Registration Section Division of Corporation			
SUBJECT:) vertime Name of Limit	Tewelry LL ed Liability Company	. C
The enclosed Articles of An	nendment and fee(s) are subm	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
	OSCAR.	Name of Person	
		Name of Person	
	Overtine	Trendry LLC	
		Firm/Company !	
•	9387 W	33th Lane	
	No. 1	Address 330 1 S	
	Haleah TL	City/State and Zip Code	
	Oct and he are	•	
-	E-mail address: (to	GIGBALE GMAIL CON	fication)
For further information conc	eerning this matter, please cal	H:	
JECAR A	surre	at (305) 546 Area Code Daytim	- 4437
Name of Pe	erson	Area Code Daytim	e Telephone Number
Enclosed is a check for the f	ollowing amount:		
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$\sqrt{2}\$ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Overtime Jawe	Iry Limit	red Liab	Sitaty Compa
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears o d Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Compar	ny were filed on	ne 23, 2020 1 498	and assigned
This amendment is submitted to amend the following:		•	
A. If amending name, enter the new name of the limited lix \mathcal{N}/\mathcal{A}	·		
The new name must be distinguishable and contain the words "Limited Lia		gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NA		
Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u> -	N/A		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our reco	ords, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:	ALW		
New Registered Office Address:	NA		
		street address, Florida _	NA
	City	, riorida _	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 1123 27 1415: 05	Type of Action
AMBR	OSCAR AGUIRGE		□Add
	•		□Remove
		9387 w 3322 Lane Hulah fi 33018	⊠ Change
AR	Taylor W. Inoth		□Add
		9367 w 332 Land Hickory fi 33018	⊠Remove
			□Change
			□Add
		-	□Remove
			□Add
			□Remove
			□Add
			□Remove
	•		□Change
			□Add
			□Remove
	•		□Cho

	ending any othe)
	Chinging	OSCAR	Hounne	from	<u>AR</u>	40	AMBR.	
	, ,							
۲)	- \	0.0	Λ	<u> </u>	نند	1 11 /	-
k	enaing T	aylar ()	noth AK	75~	Over-	ne Da	retry LL	
	<u>. </u>							
					·			
							· .	
	_							
								
	•							
,								
						<u> </u>		
							·	
								 _
				i 1 /				
. Effect	ive date, if othe	r than the date	of filing:	N/A		_	(optional)	
(If an ef <u>Note:</u>	fective date is listed.	the date must be speed in this block do	ecitic and cannot be ses not meet the a	ipplicable sta				Pursuant to 605.0207 (3) will not be listed as the
the reco	rd specifies a dela	yed effective date,	but not an effect	tive time, at	12:01 a.m. (on the ea	rlier of: (b) The	90th day after the
	. 0				,			
Dated	3/3	24/2020	<u></u>	20.	1			
			4	<u> </u>				
		Simila	ure of a member of			7	h	
		Signat	9				(A)	
			(^t	printed name	Have	rne		
	·		Typed or	printed name	of signee			

Filing Fee: \$25.00