## LZ0 000 179568

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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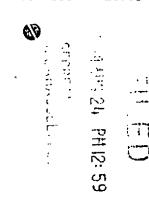


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## **COVER LETTER**

**Registration Section** 

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Corporations	_
SUBJECT: Angel L. Canno	on, LLC
Name of Lin	nited Lability Company
The enclosed Articles of Amendment and fee(s) are sub	omitted for filing.
Please return all correspondence concerning this matter	to the following:
Ange	L. Cannon Name of Person
$\mathbf{O}$	isanic of reison
<del>-</del>	12 //2
	Firm/Company
PO BI	0x 291552
	Address
Tam	a. 9-33/87
	City/State and Zip Code
<u> </u>	MICa amail Com
	to be used for future annual report notification)
For further information concerning this matter, please of	all:
Anora L. Cannon	al (813) 433-7277
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S25.00 Filing Fee ☐ \$30.00 Filing Fee &	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee.
Certificate of Status	Certified Copy Certificate of Status & Certified Copy
	(additional copy is enclosed)
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED

Anard L. Canno	n, LC *** AUG 24 PM 12: 59
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2000/79568</u> .	were filed on 26 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	PD BOX 291552 Tampa, FL 33687
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	····
New Registered Office Address:	Enter Florida street address
	Florida
New Registered Agent's Signature, if changing Registered Agent:	Cuy Zip Code

Thereby 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
Duner	Angel L. Cannon	PD BOX 291552	<u>i</u> i <b>Z</b> ∧dd
	J	10 Box 291552 Tampa, FL 33687	□Remove
			□Change
MGR Catherine Mitche	Catherine Mitchell	2013 Glendale Blud.	□Add
		Mims, FL 32754	[]Demove
			□Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
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			Change

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.) Parseaunt to 605.0207 (3gb Note; I'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.  I'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 coord is filed.  Dated  Dated  A  A  A  A  A  A  A  A  A  A  A  A  A	_	
E. Effective date, if other than the date of filing:  (Optional)  (B'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 (3.16)  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 coord is filed.		
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Dated 8 21 2020		
$/ \times 10^{\circ} 0 \times -$	Dated	8/21 2020
Signature of a member or authorized representative of a member  Angel L. Cannon		

Typed or printed name of signee