

L20000181057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2020 SEP 21 AM 9:54

2020 SEP 21 AM 10:13

C. GOLDEN

SEP 21 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Notary Job 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:

Olatokunbo Osanyinjobi  
Name of Person

Notary Job LLC  
Firm/Company

8900 N. Armenia Ave  
Address

Tampa, FL 33604  
City/State and Zip Code

admin@notaryjob.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Olatokunbo Osanyinjobi at (813) 766 8232  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Notary Job LLC.

2020 21 APR 13

(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 06/29/2020 and assigned Florida document number L20000181057

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)

8900 N. Armenia Ave  
Tampa FL 33604

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8900 N. Armenia Ave  
Tampa, FL 33604

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:

Olatokunbo Osanyinjola

New Registered Office Address:

8900 N. Armenia Ave #212

Enter Florida street address

Tampa, Florida FL 33604  
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.*

Olatokunbo Osanyinjola

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          | Olatakunbo Osanyinjabi            | 9722 Lake Chase Island Way<br>Tampa, FL. 33626             | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove<br><input checked="" type="checkbox"/> Change  |
| MGR          | Abidemi Adetutu                   | 3511 Loggerhead way<br>Wesley Chapel, FL. 33544            | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove<br><input type="checkbox"/> Change   |
| <del>A</del> | <del>Olatakunbo Osanyinjabi</del> | <del>9722 Lake Chase Island Way<br/>Tampa, FL. 33626</del> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove<br><input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove<br><input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove<br><input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove<br><input type="checkbox"/> Change |

[illegible]

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)

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 9/21/2020

Signature of a member or authorized agent

Signature of a member or authorized representative of a member

Olatokunbo Osanyinjobi

Typed or printed name of signee

**Filing Fee: \$25.00**