L20000 183757

(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
_
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Ethity Name)
<u>. </u>
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

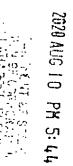
Office Use Only



400349812214

08/10/20--010/6--023 **60.00

SEP 2 9 2020 S. YOUNG



TICTU

COVER LETTER

SUBJECT: Eccen	tric Angel	LLC.	
	Name of Limite	ed Liability Company	
The enclosed Articles of An	endment and fee(s) are subm	itted for filing.	
Please return all corresponde	ence concerning this matter to	the following:	
	Michelle Lin	Name of Person	
	Eccentric A	nge LLC (Firm/Company	
		line Rd #632 Address	
	Pompano Be	City/State and Zip Code LC G g ma; l. com he used for future annual report notification	
-	Eccentric Angel L E-mail address: (to	LCG qmail. com be used for future annual report notification)
For further information conc	erning this matter, please call	:	
Michelle Lino	son	at (<u>954)</u> 5 <u>4</u> 3 - 10 Area Code Daytime Telepl	83
Enclosed is a check for the f	ollowing amount:		
S25.00 Filing Fee	S30.00 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:

TO:

Registration Section Division of Corporations

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

Eccentric Ange	21 []	.(202		
(Name of the Limited (A	Liability Com Florida Limite	ipany as it now appears of Liability Company)	on our records.)			
The Articles of Organization for this Limited Liab Florida document number 12000 183		ny were filed on <u>Sc</u>	one 30h	2020 and assigned		
This amendment is submitted to amend the following	ng:			5		
If amending name, enter the new name of the limited liability company here:						
The new name must be distinguishable and contain the word	s "Limited Lia	bility Company," the desi	ignation "LLC" o	r the abbreviation "L.L.C."		
Enter new principal offices address, if applicabl	e:					
(Principal office address MUST BE A STREET A	DDRESS)					
		<u> </u>				
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>					
R. If amending the registered agent and/or regisagent and/or the new registered office address h	itered office ere:	e address on our reco	ords, <u>enter the</u>	name of the new registered		
Name of New Registered Agent:			·			
New Registered Office Address:						
		Enter Florida	street address			
-		City	, Floric	laZip Code		
		VII)		гар Соас		

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>	Type of Action
MGR	Michelle Lingo	43 S. Pawerline Rd	DAdd
	O .	#632	□Remove
		Pompano Beach, FL	□Change
		33 9 69	□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
		-	□Add
			□Remove
			□ Change
			🗆 Add
			□Remove
			□Change

_	
_	
_	
_	
_	
_	
_	
Hectiv an effec	e date, if other than the date of filing: (optional) ive 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 (
ote: I	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
ocumei	t's effective date on the Department of State's records.
ecord	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
is file	
ated	Aug 5+h 2026 Mulle C. June Signature of a member aduthorized representative of a member
	10/10/10/10
	Mulle (. Mucas
	Signature of a member of authorized representative of a member
	Michelle C. Lingo Typed or printed name of signee