## L20000188125

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/olate/2.ph Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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November 6, 2023

MOSES FREDERICK 38 ALICANTE COURT KISSIMMEE, FL 34758

SUBJECT: MILLENNIUM RESTORATION LLC

Ref. Number: L20000188125

We have received your document for MILLENNIUM RESTORATION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 723A00025794

LLU 10 2023

## COVÉR LÉTTER

TO: Registration Section Division of Gorpor			
SUBJECT: MILLE	7 Num Dest	DEATTON, LLC	
sommer	Name of Limit	ted Liability Company	
The enclosed Articles of Ana	endment and fee(s) are sub-	nated for filing.	
Please return all corresponde	MOSES FR MILLENDIUM 38 ALICANTO LISSIAMEE,	LEDERICK Name of Person  JESTORATION: L Firm/Company  E COURT Address  The 34758  City/State and Zip Code  P ADL: ODL  to be used for future ahmual report north	
For further information conce			
MISES TREBER	eicK	at (347) 885-20	034
Name of Pen	on		: Telephone Number
Enclosed is a check for the fol	Howing amount:		
☐ \$25.00 Filing Fee ☐	1 \$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)
Mailing Address: Registration Secti Division of Corpo		<u>Street Address:</u> Registration Se Division of Co	rporations
P.O. Box 6327 Tallahassee, FL 32	7314	The Centre of '	Fallahassee oc Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

## 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.

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

Title	Name	Address	Type of Action
MER	ROIALD FREDERICK	146 ShORELINE COVET BICHMAND, CA 94804	🗆 Add
		RICHAMO, CA 94804	Remove
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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MO(E)	ive date, if other than the date of filing:
record is fil	d 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 ed.
Dated .	Vetolu 5, 2023
	M. a. Z. 1 B
	Mere Thedered
	Signature of a member or authorized representative of a member

Filling Fee: \$25.00