LZ00000200932

(Red	questor's Name)	
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(City	//State/Zip/Phon	e #)
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COVER LETTER

TO: Registration Se Division of Cor			,		
Ice Houze	LLC.		·	•	
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Calvin Francois				
	-	Name of Person		-	
	Ice Houze				
		Firm/Company			
	2921 Belmont Lane				
		Address			
	Hollywood Fl 33026				
		City/State and Zip Code			~ `
	Cal@icehouze.net				2020
For further information (e-mail address: to	to be used for future annual reposition	on mouncadon;		2020 SEP -8
Calvin François	, which is a second of the sec	754 20156	557		
Name o	of Person	at () Area Code	Daytime Telephone	Number ;	₩ 6: 20
Enclosed is a check for t	he following amount:			<u> </u>	· 23
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	sd) (b	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**

(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited)	my as it now appears on our Liability Company)	r records.)		
The Articles of Organization for this Limited I Florida document number L20000200932	Liability Company	were filed on 8/13/2020		and ass	igned
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company here:			
Ice Houze LLC.					
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	on "LLC" or the abbrev	riation "L	1C."
Enter new principal offices address, if applicable:		2921Belmont Lane			2670
Principal office address MUST BE A STRE.	Hollywood Fl 33026		<u> </u>	<u>(2)</u>	
				-	
				□ 	ငာ
Enter new mailing address, if applicable:					<u></u>
Mailing address MAY BE A POST OFFICE BOX)					<u> </u>
	- 			(5 1	23
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records.	, <u>enter the name o</u>	f the ne	<u>v registe</u> i
Name of New Registered Agent:	Danely Concep	ocion			
New Registered Office Address:	2921 Belmont	l.ane			
	Enter Florida street address				
Hollywood		, Florida <u>3</u>		3026	
		City		Zip Code	
New Registered Agent's Signature, if changing	Dagistane I A ===+:				

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Calvin Franncois	2921 Belmont	■Add
		Hollywood Fl 33026	□Remove
			[] Change
AMBR	Danely Concepcion	2921 Belmont Lane	≅∧dd
		Hollywood Fl 33026	□Remove
			□Change
			□Remove
		<u></u>	TDChang ST
			⊡Add t
			☐Remove CD
			
		****	□Remove
			□Add
			□Remove
			□Change

			
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E. Effective date, if other than t	he date of filing: must be specific and cannot be prior to date of filing or more that	(optional)	
(If an effective date is listed, the date r <u>Note:</u> If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requ	an 90 days after filing.) Pursuant to 605.0 tirements, this date will not be listed	207 (3 gb) Las the
If the record specifies a delayed effect record is filed.	tive date, but not an effective time, at 12:01 a.m. on the	earlier of: (b) The 90th day after t	he
Dated 8/18/2020	Signature of a member or authorized representative of a n	nember	
Danely Concepcion	_		

Filing Fee: \$25.00

Typed or printed name of signee