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COVER LETTER

TO: Registration Section Division of Corporations	
	Limited Liability Company
Mailing Address: Registration Section Division of Corporations (additional copy is enclosed) Street Address: Registration Section Division of Corporations Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations	
Please return all correspondence concerning this ma	itter to the following:
Jessic	Name of Person
Division of Corporations SUBJECT: Adm/Ved Forth 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: Tessica Alexander Name of Person Adm/Yed Forth LLC Firm/Company TSA1 Paula On Ve. *** Address: (To be ased for future and all report notification) For further information concerning this matter, please call: Tessica Alexander Name of Person at (\$13) Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Tessica Certificate of Status Certificate of Status Registration Section Registration Section	
7521 Po	Address Address
Tampa,	FL 33685 City/State and Zip Code
E-mail addre	ess: (to be used for future andual report notification)
For further information concerning this matter, plea	se call:
Enclosed is a check for the following amount:	
	s Certified Copy Certificate of Status &
Mailing Address:	Street Address:
Registration Section	
	· ·
	2415 N. Monroe Street, Suite 810
Tallahassee, FL 32314	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Admived Forty (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 711512020 ar	d a ş signed
Florida document number <u>LADOODAOU.5DU</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviati	on " L .L.C."
Enter new principal offices address, if applicable:	7521 Paula Orive. # 2	101274
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33685	
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of th</u>	e new registered
l		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	=-
	, Florida City Zip	Code
New Registered Agent's Signature, if changing Registered Agent:	·	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familio provided for in Chapter 605, F.S. Or, if this	r with and document is
if Chai	nging Registered Agent, Signature of New Registered	Agent

amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	
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ffective date, if other than the date of filing:	t to 605.0207 (be listed as t
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th datisetiled.	ay after the
ated 62/15/2021	
1 10 = 4	
Signature of a member or authorized representative of a member	}
Jessica Alexander Typed or printed name of signee	