## La0000209695

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	)
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C. GOLDEN Aug 2 0 2020

## **COVER LETTER**

TO:

	Registration Se Division of Cor			
SUBJEC		TREACH, LLC		
SUBJEC		Name of Lim	ited Liability Company	<del></del>
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		LYNNELL WILLIAMS		
			Name of Person	
			Firm/Company	<u> </u>
		5520 BELLWOOD STREE	ET	
			Address	
		ORLANDO, FL. 32812		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		lynnell.williams1908@gma		
		E-mail address: (	to be used for future annual report no	tilication)
For furthe	er information c	oncerning this matter, please co	ali:	
LYNNEL	LE WILLIAMS		305 684-8656 at ()	
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	0 Filing Fee	□ \$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 Addres		Street Address:	
Registration Section Division of Corporations		Registration Se Division of Co		
	P.O. Box 632	-	The Centre of	•
-	Tallahassee, l	FL 32314	2415 N. Monre	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A & R OUTREACH, LLC

20 0 19 PH 2:17

(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records la Limited Liability Company;	<u>.</u> )
The Articles of Organization for this Limited Liability Florida document number L20000209695	July 20, 2020  Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lic	mited 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 ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Emer Florida street address	
	, Flo	ridaZip Code
	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.

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>	Address	Type of Action
MGR	LYNNELL WILLIAMS	5520 BELLEWOOD ST ORLANDO, FL 32812	<b>=</b> Add
			□Remove
			□Change
MGR NATA	NATASHA R BREWINGTON	5520 BELLEWOOD ST ORLANDO, FL 32812	□Add
			Remove
	- <del></del>	□Change	
		□Add	
		□Remove	
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fective date, if other than the d on effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Dep	k does not meet the	applicable statutor	ng or more than 90 day ry filing requiremen	(optional) ss after filing.) Pursuant to ts, this date will not be	o 605.020 : listed a
ecord specifies a delayed effective is filed.	date, but not an effec	rtive time, at 12:01	l a.m. on the earlier	of: (h) The 90th day	after the
JULY 30	2020	<del></del> •			
aled	2020 (L) (L) ignature of a member of	lians or authorized represe	entative of a member		_

Filing Fee: \$25.00