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COVER LETTER

то:	Registration Se Division of Cor			
eun in	CT CTC	kaging LLC	•	A
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		trwin E Kendall		
			Name of Person	
		Banyan Packaging LLC		
Firm/Co		Firm/Company		
1181 Sawgrass Corporate Parkway				
		· · · · · · · · · · · · · · · · · · ·	Address	
		Sunrise Florida 33325		
			City/State and Zip Code	
		banyanpackagingcompany@	ngmail.com to be used for future annual report no	vitration)
For furtl	her information c	oncerning this matter, please co	·	inite anony
	Kendall	p	954 494.5032	
		f Person		me Telephone Number
Enclose	d is a check for th	ne following amount:		
■ \$25	.00 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 Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Con you Pao (Name of the Limited Lie (A Flo	ability Company at it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabili	ty Company were filed on $08/01/2020$ and assigned $04/4$
This amendment is submitted to amend the following	is submitted to amend the following: name, enter the new name of the limited liability company here: the distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." cipal offices address, if applicable: address MUST BE A STREET ADDRESS) ing address, if applicable: s MAY BE A POST OFFICE BOX) the registered agent and/or registered office address on our records, enter the name of the new registered enew registered office address here:
A. If amending name, enter the new name of the	limited liability company here:
he new name must be distinguishable and contain the words	'Limited 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 AL	ODRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	2
	<u></u>
3. If amending the registered agent and/or registogent and/or the new registered office address her	ered office address on our records, <u>enter the name of the new registered</u> re:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
<u> </u>	
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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>	<u>Address</u>	Type of Action
Mgr	Obie Garrison	5061 NW 45 Terrace, Coconut Creek, Fl. 33073	= Add
			□ Remove
			□ Change
			□Add
			□ Remove
		· · · · · · · · · · · · · · · · · · ·	□ Change
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		· · · · · · · · · · · · · · · · · · ·	□ Add
		 	□Remove
			□Change

If amending any other infor	nation, enter change(s) here: (Attach addition	nal sheels, if necessary.)
~		

	 ·	
Effective date, if other than the structure of the struct	nust be specific and cannot be prior to date of filing or mor block does not meet the applicable statutory filing	(optional) re than 90 days after filing.) Pursuant to 605.0207 (requirements, this date will not be listed as t
e record specifies a delayed effected is filed.	tive date, but not an effective time, at 12:01 a.m. or	the earlier of: (b) The 90th day after the
Dated August 1	2022	
	Signature of a member or authorized representative of	f a member
I	·	
Irwin E Kendall	Typed or printed name of signee	