

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000318950 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; PARASEC

Account Number : 120180000086 Phone : (916)576-7000 Fax Number : (800)603-5868

Enter the email address for this business entity to be used for future annual report mailings. Enter only annual report annual report mailings. Enter only one email address please.** SEP I 6 2020 RLOPS@PARASEC.COM Email Address: Ľ LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TODDLELY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

To: 18506176383 From: 19165767051 Date: 09/14/20 Time: 9:15 AM Page: 03/05

ARTICLES OF AMENDMENTS: 11 PM 2: 10 TO ARTICLES OF ORGANIZATION OF

U	r	
Toddlel (Name of the Limited Liability Compa	y, LLC my as it now appears on our records.)	
(Name of the Limited Liability Compa (A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 8/19/2020	and assigned
Florida document number <u>1.20000255803</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 Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8350 NW 52ND TER STE 301 # 337	
(Principal office address MUST BE A STREET ADDRESS)	DORAL, FL 33166	
Enter new mailing address, if applicable:	8350 NW 52ND TER STE 301 # 33	7
· · · · · · · · · · · · · · · · · · ·	8350 NW 52ND TER STE 301 # 337	
(Mailing address MAY BE A POST OFFICE BOX)	DORAL, FL 33166	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		r the name of the ne
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 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 Changing Registered Agent, Signature of New Registered Agent

To: 18506176383 From: 19165767051 Date: 09/14/20 Time: 9:15 AM Page: 04/05

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>	Name	Address	Type of Action	
			D Add	
			□ Remove	
			D Change	
			Add	
		 	□ Remove	
			Change	
			Add	
		□ Remove		
			Change	
			□ Add	
		□ Remove		
		••••	□ Change	
	- ,	☐ Remove		
			□ Change	
 				
		□ Remove		
			☐ Change	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ___ _ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. September 9th 2020 Dated Signature of a member or authorized representative of a member Jesus Ramirez Typed or printed name of signee

Date: 09/14/20 Time: 9:15 AM Page: 05/05

To: 18506176383 From: 19165767051

Page 3 of 3