120000265586

(R	equestor's Name)	
(A	ddress)	
	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)	
,	, ,	
(U	ocument Number)	
fied Copies	Certificates of	Status
icial Instructions to	Filing Officer:	
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	Office Use Only	
	Office OSE Offig	



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2020 NOV 16 FH 2: 47

2020 NOV 19 AH IO: 18

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November 17, 2020

CAPITAL CONNECTION, INC.

SUBJECT: DIGITAL POPPER LLC

Ref. Number: L20000265586

We have received your document for DIGITAL POPPER LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 620A00023040

Yasemin Y Sulker Regulatory Specialist III

MAD HOA 16 LH 1:30

www.sunbiz.org

CAPITAL CONNECTION, INC. 'E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 0) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	
al Popper LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Cartificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name Corp Record Search
	Officer Search
	Fictitious Search
	Fictitious Owner Search
re	Vehicle Search
	Driving Record
ed by: SETH	UCC 1 or 3 File
11/18/20	UCC 11 Search
Date Time	UCC 11 Retrieval
Will Pick Up	Courier

COVER LETTER

TO: Registration S Division of Co			
	POPPER LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	HERMAN SINGH CPA		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	HERMAN SINGH & ASS	SOCIATES INC	
		Firm/Company	
	600 RINEHART RD SUI	TE 2008	
		Address	
	LAKE MARY FL 32746		
		City/State and Zip Code	
	HSA.TAXES@GMAIL.CO		
		to be used for future annual report notif	ication)
For further information of	concerning this matter, please o	all:	
HERMAN SINGH		407 831-1399 at ()	
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25,00 Filing Fec	☐ \$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 Address Registration	Section	Street Address: Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	

Tallahassee, FL 32314

Scanned with CamScanner

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIGITAL POPPER LLC		
(Name of the Lim	(A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited I	Liability Company were filed on B	/26/2020 and assigned
Florida document number L20000265586	 ·	
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability company h	nere:
The new name must be distinguishable and contain the	words "Limited Linbility Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	·
		, E
Enter new mailing address, if applicable:		SCO HEAT
Mailing address MAY BE A POST OFFICE		70 2
Many and Estat DEAT OF OTTICE	<u>. 100A)</u>	
		
3. If amending the registered agent and/or	registered office address on our	records, enter the name of the new registr
gent and/or the new registered office addr	ess here:	
		F. 9
Name of New Registered Agent:	FRACHAR JOEL NEUMANN	ANGLADA
New Registered Office Address:	745 CREEKWATER TERRACE	E #11S
	Enter Flo	orida street address
	LAKE MARY	, Florida <u>32746</u>
	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 Stanature 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>	Name	Address	Type of Action
MGRM	FRACHAR JOEL NEUMANN ANGLADA	745 CREEKWATER TERRACE #115	
		LAKE MARY, FL 327446	□Remove
			≅ Change
			□Remove
			Change
			□Remove
			Change
			□Add
			□Remove
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cument	specifies a delayed effectiv	e date, but not an effect	tive time, at 12:01 a	.m. on the earlier o	f: (b) The 90th day	after the
record s	.		tive time, at 12:01 a	.m. on the earlier o	f: (b) The 90th day	after the
cumeni ecord s is filed	Specifies a delayed effection CTOBER 14	ve date, but not an effect	tive time, at 12:01 a	.m. on the carlier o	f: (b) The 90th day	after the
ecumeni ecord s is filed	.		tive time, at 12:01 a	.m. on the carlier o	f: (b) The 90th day	after the
ecord s is filed	.		·		f: (b) The 90th day	after the
ecord s is filed	.	2020 Minimum Signature of a member or	·		f: (b) The 90th day	after the