120000277997

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL
(Duninger Entire Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700368245667

06/21/21--01038--011 **30.00

23 " 31 13 2:12

7/19/21/6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- HARVES!	PROJECT	MANAGEL	EN/3 LC	<u>-C</u>
(Name of the Limited	d Liability Company A Florida Limited Lia	as it now appears on ou bility Company)	<u>ir records.)</u>	
The Articles of Organization for this Limited Lia Florida document number <u> </u>	bility Company w 7997.	ere filed on $09/$	18/2020	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of the new name must be distinguishable and contain the wo	7770	20-12/	ion "LLC" or the abb	oreviation "L.L.C."
Enter new principal offices address, if applica	ble:			
<u>Principal office address MUST BE A STREET</u>	`ADDRESS)			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B				
B. If amending the registered agent and/or reagent and/or the new registered office address	here:			e of the new registered
Name of New Registered Agent:		NE DURA		<u> </u>
New Registered Office Address:	13193	Slo 21 Enter Florida stre	et address	<u> </u>
	HIRAMA	H. City	, Florida	33027
		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
HER	GUERRY VOSAPh	19553 NW 2nd AVE to	
		MIAMI GARDENS, FL 33169	Z KRemove
			□Change
			⊡Add
			🗀 Remove
			🖸 Change
			CAdd
			⊟Remove
			□ Change
			□Add
			□ Remove
			Change
			JAdd
			□Remove
			🗖 Add
			□Remove
			Change

							
							_ _
		· · · · · · · · · · · · · · · · · · ·	<u></u>				
							
				<u></u>			
·=							
	·					-	
reffective date i <u>te:</u> If the date	s listed, the date m	ust be specific and block does not m	cannot be prior to seet the applicab	$3 - 2 \circ 2 \circ 1$ date of filing or mo le statutory filing	rc than 90 days afti	ional) or filing.) Pursuam to iis date will not be	605.020 listed a
s filed.			an effective time	e, at 12:01 a.m. o	n the earlier of: (b) The 90th day	after the
ed 6-1	3-202	1.					
	7	5	/				
		Signature of a n	rembereor authoriz	zed representative of	of a member		_

ETT E #35.00