L20000285998

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

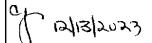
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COVER LETTER

	gistration Sec vision of Corp		·.	
con en any from		SINESS DEVELOPMENT &	COMPANY, LLC	. "
SUBJECT:		Name of Limi	ited Liability Company	·
The enclose	d Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		DORIS R. MUSCARELLA	٩	
			Name of Person	
		DORIS BUSINESS DEVE	ELOPMENT & COMPANY, LLC	
			Firm/Company	
		7863 Dundee Lane		
			Address	
		Delray Beach, Fl., 33446		
			City/State and Zip Code	
		dorisrmusc@gmaif.com		
		E-mail address: ()	to be used for future annual report noti	fication)
For further i	nformation co	oncerning this matter, please ca	ıll:	
Doris R. Mu	iscarella		954 240-4853 at ()	
	Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$25.00 H	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 Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DORIS BUSINESS DEVELOPMENT & CO., LLC DORIS BUSINESS DEVELOPMENT & COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con-	npany were filed on	and assigned
Florida document number 1.20000285998		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
FAIRWAYS TO PROFITS LLC		
The 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 ADDRES	<u> </u>	2023 P. Dy
	——————————————————————————————————————	
	•	0
Enter new mailing address, if applicable:		77) 32
(Mailing address MAY BE A POST OFFICE BOX)		
		ω
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	ffice address on our records, <u>enter (</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
·	Enter Florida street address	
	Flo	orida
	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

Title *	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Add
			Remove
			Change
			□Add
			□Remove
			□ Change
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fective date, if other than the n effective date is listed, the date must te: If the date inserted in this blocument's effective date on the De	be specific and can ck does not meet	the applicable s	e of filing or more the statutory filing req	(option nan 90 days after fil nuirements, this d	ing.) Pursuant to 605.	.020 ed a:
ecord specifies a delayed effective is filed.	date, but not an e	ffective time, a	t 12:01 a.m. on th	e earlier of: (b)	The 90th day after	the
November 14,)23				
	<i>i</i>					