

L70 000302319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

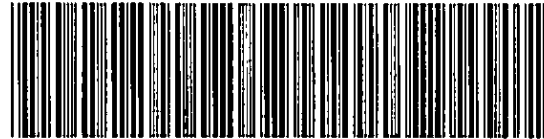
(Business Entity Name)

(Document Number)

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12/10/20
[Signature]

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brickenstein North LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please forward all correspondence concerning this matter to the following:

Lashawn Harris
Name of Person

Firm/Company

1703 N McMullen Booth RD #662
Address
Safety Harbor, FL 34695

City/State and Zip Code

info@brickensteinNorthLLC.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person
Lashawn Harris

Area Code (407) Daytime Telephone Number 578-9090

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| ☒ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee &
Certificate of Status | ☐ \$50.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$75.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Registration Section
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32306

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Brickstein North LLC
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on September 24, 2020 and assigned Florida document number L200003023.19

The amendments to the Articles are the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Brickstein North LLC
(Principal office address **MUST BE A STREET ADDRESS**)

Brickstein North LLC
(Mailing address **MAY BE A POST OFFICE BOX**)

B. If amending the registered agent or the registered office address, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

LaShaun Harris

New Registered Office Address

1703 N McMullen Booth RD #602
Enter Florida street address

Safety Harbor, Florida 34695
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.

LaShaun Harris
If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Name</u>	<u>Address</u>	<u>City/State/Zip</u>
		☐ Add
		☐ Change
		☐ Remove
		☐ Add
		☐ Change
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Add

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[illegible]

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.

Dated October 28, 2020.

Son Ward 7-30
Typed or printed name of signee