# L2000030492Z

| (Requ                      | uestor's Name) |             |
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| PICK-UP                    | MAIT           | MAIL        |
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| (Docu                      | ument Number   | )           |
| Certified Copies           | Certificate    | s of Status |
| Special Instructions to Fi | ling Officer:  |             |
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## **COVER LETTER**

| ·<br>:            |  |  | <del></del>   |
|-------------------|--|--|---|
| ed Articles of An | nendment and fee(s) are sub-   | mitted for filing.   |   |
| n all corresponde | ence concerning this matter  | to the following:  |   |
|                   | Ron L  | Name of Person   |   |
|                   |  | Firm/Company   | <del></del>   |
|                   | 11081 Brand  | ywine Lake Way   | <u>/</u>  |
|                   | Boynton Be   | Och. F/ 33473<br>City/State and Zip Code   | 3   |
| -                 | Rone allon<br>E-mail address: (1   | <u>rericum levels.com</u> to be used for future annual report noti   | fication)   |
| information cond  |  |  |   |
| Name of Po        | H-<br>erson  | at ( <u>954</u> ) <u>260 - 2</u><br>Area Code Daytim   | R803<br>e Telephone Number  |
| a check for the f | ollowing amount:   | ,  |   |
| 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)  |
|                   | information concerns all corresponded Name of Personal Corresponde | Roy Callon E-mail address: ( information concerning this matter. please callon Name of Person  Name of Lim  Roy Callon E-mail address: ( information concerning this matter. please callon  Roy Callon  E-mail address: ( information concerning this matter. please callon  San Leutt  Name of Person | Name of Limited Liability Company  Levitt, LLC.  Name of Limited Liability Company  and Articles of Amendment and fee(s) are submitted for filing.  The all correspondence concerning this matter to the following:  Row Levitt  Name of Person  Firm/Company  11081 Branch wine Lake was Address  Roynton Boach. Fl. 33473  City/State and Zip Code  Rowe allower two levels. com  E-mail address: (to be used for future annual report notice information concerning this matter. please call:  Name of Person  at (954) 260-3  Area Code  Daytim  at check for the following amount:  Filling Fee Sould S555.00 Filing Fee & Certificate of Status  Certificate Of Status |

### Mailing Address:

TO:

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

### Street Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2020

RON LEVITT 11081 BRANDYWINE LAKE WAY BOYNTON BEACH, FL 33473

SUBJECT: LEVITT, LLC Ref. Number: L20000304922

We have received your document for LEVITT, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

AAL, INC - P08000065350

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.

PleasE See the Attached.

Shelia S Young Regulatory Specialist II

Letter Number: 520A00023122

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Levitt, LLC   |  |
|---|--|
| ( <u>Name of the Limited Liability Company</u><br>(A Florida Limited Liab   | is it now appears on our records.)<br>Hity Company)          |
| The Articles of Organization for this Limited Liability Company we  | re filed on Sept 28 2020 and assigned                        |
| Florida document number <u>L2000030H922</u> .   |  |
| This amendment is submitted to amend the following:   |  |
| A. If amending name, enter the new name of the limited liabilit   | company here:  |
|   | ads USA, 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 ADDRESS)   |  |
| _   |  |
| Enter new mailing address, if applicable:   | · · · · · · · · · · · · · · · · · · ·                        |
| (Mailing address MAY BE A POST OFFICE BOX)  |  |
| _   |  |
| B. If amending the registered agent and/or registered office add agent and/or the new registered office address here: | ress on our records, enter the name of the new registered    |
| Name of New Registered Agent:   |  |

#### New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

Enter Florida street address

\_, Florida \_\_

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 |
|--------------|-------------|---------|----------------|
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| i effective dat<br>te: If the da | e, if other than the is listed, the date mate inserted in this fective date on the | iust be specific an<br>block does not | nd cannot be price<br>meet the appli | or to date of filing<br>cable statutory | or more than 90 d |                |                                       |
| cord specifi<br>s tiled.         | ies a delayed effect   | iive date, but no                     | ot an effective                      | time, at 12:01 a                        | .m. on the earlie | er of: (b) The | 90th day after the                    |
| ed                               | 10/8   | <u>.</u><br>Ja:                       | 2020                                 |   |                   |                |                                       |
|                                  |  | (メーロノ                                 | 1 M - M                              | MAX                                     |                   |                |                                       |
|                                  | <u>.                                    </u>                                       | Signature of a                        | member or aut                        | horized represent                       | ative of a member | <u> </u>       |                                       |