

L2C 000312395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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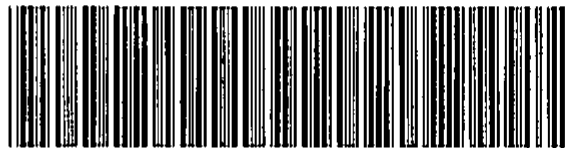
(Business Entity Name)

(Document Number)

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FEB 12 2021  
S. YOUNG

2021 JAN -5 PM 6:23

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FLORIDA'S Best Green Chance LLC.  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

David L Johnson Jr  
Name of Person

FLORIDA'S Best Green Chance L.L.C.  
Firm/Company

424 NW 16<sup>th</sup> Ave  
Address

FORT LAUDERDALE, FLORIDA 33311  
City/State and Zip Code

Biggdream85@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Johnson at (754) 600-7334  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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  
Tallahassee, FL 32314

**Street Address:**

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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FLORIDA'S BEST GREEN Chance L.L.C.

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

2021 JAN -5 PM 6:23

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The Articles of Organization for this Limited Liability Company were filed on October 6, 2020 and assigned  
Florida document number L 2 0000312395.

This amendment is submitted to amend the following:

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

FLORIDA'S BEST GREEN Solutions L.L.C.

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)

424 NW 16<sup>th</sup> Ave

Fort Lauderdale, Florida, 33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

424 NW 16<sup>th</sup> Ave

Fort Lauderdale, Florida, 33311

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

Name of New Registered Agent:

David L. Johnson Jr

New Registered Office Address:

424 NW 16<sup>th</sup> Ave

*Enter Florida street address*

Fort Lauderdale

*City*

Florida

33311

*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.*

David L. Johnson Jr

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Calvin Johnson	222 E. DIXIE COURT	<input type="checkbox"/> Add
		Apt. # 305, Florida, 33311, US	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	David Johnson Jr	424 NW 16 <sup>th</sup> Ave	<input checked="" type="checkbox"/> Add
		Fort lauderdale, FL, 33311, us	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

1. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

X1/A

2. Effective date, if other than the date of filing: 12/29/20 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 12/29/20

David L. Johnson Jr  
Signature of a member or authorized representative of a member

David L. Johnson Jr

Typed or printed name of signer