LZO 000 337018

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COVER LETTER

TO: Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:	MADANE			
SUBJECT:		Name of Lim	ted Liability Company	
The enclosed	I Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		JEAN CHRIST- DONNE		
			Name of Person	
		TAMPA BAY ENTERPRI	SES SERVICES LLC	
			Firm/Company	
10622 BAMBOO ROD CIR				
		RIVERVIEW, FL 33569		
		<u></u>	City/State and Zip Code	·
		tampabayenter@gmail.com		
		E-mail address: (to be used for future annual report no	tification)
For further i	nformation c	oncerning this matter, please ca	all:	
SONY SAU	VEUR		718 496-4960	
Name of Person			at () Area Code Dayti	me Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fcc & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Ma</u> Re	iling Addres gistration S	<u>s:</u> Section	Street Address: Registration S	ection
		orporations	Division of Co	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MADANEVINCE LLC			
(Name of the Lim	ted Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited L lorida document number L20000337018	Liability Company	were filed on 10/23/2020	and assigned
his amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name (of the limited liab	oility company here:	
AMPA BAY ENTERPRISES SERVICES LLC			
ne new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		10622 BAMBOO ROD CIR	
		RIVERVIEW, FL 33569	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10622 BAMBOO ROD CIR RIVERVIEW, FL 33569	· · · · · · · · · · · · · · · · · · ·
. If amending the registered agent and/or gent and/or the new registered office address.	ess here:	address on our records, enter the nam	e of the new regist
Name of New Registered Agent:	<u> </u>		<u> </u>
New Registered Office Address:	5575 SEMORA		·
		Enter Florida street address	
	ORLANDO.	, Florida 328	322
	 -	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
AMBR	JEAN CHRIST-DONNE	10622 BAMBOO ROD CIR RIVERVIEW, FL 3356	9 ∃ Add
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ective date, if other than t effective date is listed, the date it te: If the date inserted in this nument's effective date on the	must be specific and ca block does not mee	annot be prior to dat et the applicable s	e of filing or more the statutory filing requ	(optiona an 90 days after fili pirements, this da	ig.) Pursuant to 605.020
cord specifies a delayed effects filed.	ctive date, but not ar	n effective time, a	t 12:01 a.m. on the	e earlier of: (b)	The 90th day after the
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	- M .A	- Donne	Tedn		

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