Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AJ ACCOUNTING SERVICES, INC.

Account Number : I20110000092 Phone : (305)448-9584 Fax Number : (305)448-9569

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BIRD VAPE LLC

Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu

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		COVER LETTER		
TO: Registration S Division of Co	Section prporations			
SUBJECT: BIRD VA	PE LLC			
	Name of L	imited Liability Company		
The enclosed Articles of	Amendment and fee(s) are so	thmitted for CU.		
	ondence concerning this matte			
	MOHAMMED YOUSE!	:		
		Name of Person		- 03
	BIRD VAPE LLC			2021 JUL 13 SECRETARY
		Firm/Company		
	5790 BIRD RD			(
		Address		
	CORAL GABLES, FL 33	1155		AM 8: 57 CF STATE F, FLORUDA
		City/State and Zip Code		> ~ ·
		(to be used for future annual report not	ilication)	
For further information co	oncerning this matter, please c	eall:		
MOHAMMED YOUSEF		305 448-9584		
Name of	Person		e Telephone Number	 -
Enclosed is a check for th	e following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Cop (additional copy	l Status & Oy
Mailing Address: Registration So Division of Co P.O. Box 6327 Tallahassec, FI	ection porations	Street Address: Registration Sec Division of Cory The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810	

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIRD VAPE LLC		
(Name of the Limite	d Liability Company as it now appears on a A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Lia		121
Florida document number L21000012879		and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designal	ion "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applical	bler	
(Principal office address MUST BE A STREET	- ADDRESS	
Enter new mailing address, if applicable:	<u> </u>	·
(Mailing address MAY BE A POST OFFICE B	ava	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on our records here:	, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	ol address
		, Florida
	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.

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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>	Name	Address	Type of Action
AMBR	MURAT KHALIFA	5790 BIRD RD	
		CORAL GABLES, FL 33155	□Remove
			□ Change
			🗆 🗆 Add
			□Remove'
			□Change
- - -			
			□Remove
			Change
			
			Change
-, _			🗆 🗆 Add
			□ Remove
			□Change
			□Add
			CIRemove
			Change

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	57 PA
Tective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date. If the date inserted in this block does not meet the applicable statutory filing requirement current's effective date on the Department of State's records.	_ (optional) ays after filing.) Pursuant to 605.0207 nts, this date will not be listed as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie is filed.	er of: (b) The 90th day after the
nted JULY 13 , 2021	
Signature of a member or authorited representative of a member	
MOHAMMED YOUSEF	