L21000017997

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LEFEKEKA LLC	·
Name of Limited Liab	Hity Company
The enclosed Articles of Amendment and fee(s) are submitted for	or filing.
Please return all correspondence concerning this matter to the fo	oflowing:
Talya Huya	and of Person
	irm/Company
1001 Julia ?	Address
Winter Haver	1 Florida 33880 ;
thus ghue of Emphil yldress: (to be use	d for future annual report notification)
For further information concerning this matter, please call:	
Talya Huyghue Name of Person	at (<u>340</u>) <u>998 - 00 2 0</u> Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	,
Certificate of Status	55.00 Filing Fee & Certified Copy additional copy is enclosed) S60.00 Filing Fee. Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LEFEREXA ame of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ____ Florida document number <u>L 210000 17997</u> This amendment is submitted to amend 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 "Lumited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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: New Registered Office Address: Enter Florida street address

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 Changing Registered Agent, Signature of New Registered Agent

. Florida

1		and address of anch t	Sarcan being added
	Authorized Person(s) authorized to mana from our records:	age, <u>enter the title, name, and address of each j</u>	j
MGR = Ma	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			DChange
Ah	Takayla D Hansen	Winter Hemon 71 33880	□Add
			Remove
			□Ghange
AL	Evol C Bynn-Datcher	Shrepeport, LA. 71115	
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AL	Karen Francis	Winter Heurn F1 33880	🗆 🗖 Ådd
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			© Change
AP	Matilda Hujshue	winter Haven 71 33880	
ı	_		Eemove
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AP_	Elroy Huyghue	601 Sulia St SE Winter Howen +1 338	<u>8</u> 0
			Remove
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(If an effectiv	date, if other than t we date is listed, the date i he date inserted in this	nust be specific and	cannot be prior to dat	te of filing or more the	option (option) (an 90 days after file	ling.) Pursuant to 6	05.0207 (,
	's effective date on the			statutory ming rec	jun emento, uno d	and will flow be in	l
he record spord is filed.	pecifies a delayed effec	tive date, but not	an effective time, a	it 12:01 a.m. on th	ne earlier of: (b)	The 90th day af	ter the
Dated	-eburary	12.	2021.			,	
	-eburary Lalya	Signature of a s	chul nomber or authorized	representative of a	member		
	Talya	Huy	3hu-e Depend or printed nar	r.			