121000021387

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

PLEASE FILE THE ATTACHED AND RETURN XXXX Plain Copy Certified Copy Certificate of Status **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certified Copy of Arts & Amendments Certificate of Good Standing	
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**ADD@T!!/E' / NDTADIA!	÷
**APOSTILLE' / NOTARIAL CERTIFICATION **	
COUNTRY OF DESTINATION	
NUMBER OF CERTIFICATES REQUESTED	
TOTAL OWED \$25.00 ACCOUNT #: 120160000	 0072
Please call Tina at the above number for any issues or concerns. Thank yo	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on or Liability Company)	nr records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000021387</u> .	were filed on $\frac{01/07/20}{}$	21 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7932 Southside Blvd.	
(Principal office address MUST BE A STREET ADDRESS)	Apt 2408	
17 melyar office analysis in the second of t	Jacksonville, FL 32256	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our e:	records, enter the name of the new 826
Name of New Neglitered Agent.		िल
New Registered Office Address:	Enter Florida stre	ret address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ee to act in this capac	

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	Kevin Edward Amanquatiah Osei-Kofi		
			_□ Remove
		7932 Southside Blvd. Apt. 2408 Jacksonville, FL 32256	■ Change
			Remove!!!!
		Change	
			☐ Remove
			Change
		□ Remove	
			☐ Change
	<u></u>		
		☐ Remove	
			Change
			Add
			□ Remove
			Change

Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of general secord is filed.
Datec	03/15/2021
	Kevin Osei-Kofi
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00