## L210000 44697

		<b>!N</b>  1
(Requestor	's Name)	
(Address)		
(Address)		
(City/State/	/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business	Entity Name)	
(Document	t Number)	
Certified Copies C	Certificates of Status	
Special Instructions to Filing O	Officer:	

Office Use Only 5.C.

06/16/2(



500365627705

05/07/21--01009--004 \*\*25.00

001 11/1 17 D

## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
SUBJECT:	CelecShopy	u ILC.	
SOBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	— Me lodi	L Celec Name of Person	
		Shop 40,LLC Firm/Company	
	9442 TREAS	Address	<del></del>
	SAINT JAMES	City/State and Zip Code	54
	Celecsh E-mail address: (	to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	all:	C)
M 5 lo 6 Name	of Person	at ( <u>J39</u> <u>J29</u> Area Code Daytimo	
Enclosed is a check for	the following amount:		
SQ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration		Street Address: Registration Sec	ction
_	Corporations	Division of Cor	
P.O. Box 63	27	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Celecshopyu L	, L C	
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L 2   0000 Hy 697</u> .	ny were filed on $1 - 25 - 21$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability 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)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the na	ame of the new registere
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		<u>-</u>
	Enter Florida street address	≥ J
<del> </del>	, Florida _	N Zip Code
	- 4 -	<u> </u>

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>	Name	Address	Type of Action
MGR	Melody L Celec	GuyTreas in lake (+ Saint James City FL 33954	<b>≿</b> ]∧dd
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove !
			☐ Change
			≥ □∧dd
			:: 2 ☐Remove
			□Change
			□Add
			□Remove
			□Change

			<del></del>
			<u> </u>
``	`.		
			<u> </u>
		<u> </u>	
	·		
		·	
			<del></del>
		<u>`</u>	
ctive date. if other than the date of filing:		(option	ool) S
effective date is listed, the date must be specific and ca	annot be prior to date of filing or me	ore than 90 days after fil	ling.) Pursuant to 605.020
e: If the date inserted in this block does not med iment's effective date on the Department of Stal		g requirements, this d	ate willmot be listed a
•			-1
ord specifies a delayed effective date, but not ar	n effective time, at 12:01 a.m. c	on the earlier of: (b)	The 90th day after the
filed.			
and the second			24
td <u>1-03 - 2021</u>			
	$\bigcirc$ ( $\bigcirc$ $\bigcirc$ $\bigcirc$		
Y Y		of a mumb a-	
oistrainte bi a me	mber or authorized representative	or a memoer	