## K21000055117

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nar	ne)
(Do	ocument Number)	
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## **COVER LETTER**

TO: Registration Sec Division of Corp			
		•	<i>:</i>
SUBJECT: TWINS96SE		ited Liability Company	A-24-37-47-17-17-17-17-17-17-17-17-17-17-17-17-17
	Name of Em	nea classify company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Emily A. Chamizon	Name of Person	
		Ivanic of Cison	
	TWINS96SE,LLC		
	-	Firm/Company	
	15101 15 - 5 - 15 '		
	15401 Destiny Drive	Address	
	Delray Beach, FL 33446	City/State and Zip Code	<u>.</u>
		·	
	emilycharnizon@gmail.con E-mail address: (	n to be used for future annual report no	tification)
For further information co	ncerning this matter, please ca	all:	
Emily A. Charnizon		at ( <u>561</u> ) <u>706-4337</u>	
Name of	Person	Area Code Daytir	ne Telephone Number
			2021
Enclosed is a check for the	: following amount:		
■ \$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)
			Ę
Mailing Address:		<u>Street Address:</u> Registration Se	ection
Registration So Division of Co		Division of Co	
P.O. Box 6327	•	The Centre of	
Tallahassee, Fl	L 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lis (A Flo	ability Compar orida Limited I	ny as it now appears on our records.) nability Company)	· · ·	<del></del>	
The Articles of Organization for this Limited Liabilit	y Company	were filed on February 01,2021		and assigned	
Florida document number <u>L21000055117</u>	·				
This amendment is submitted to amend the following	<u>.</u>				
A. If amending name, enter the new name of the	limited liabi	lity company here:			
The new name must be distinguishable and contain the words "	Limited Liabili	ity Company," the designation "LLC" o	r the abbrev	iation "L.L.C."	
Enter new principal offices address, if applicable:		15401 Destiny Drive			
(Principal office address MUST BE A STREET ADDRESS)		Delray Beach, F1, 33446			
Enter new mailing address, if applicable:		15401 Destiny Drive			
(Mailing address MAY BE A POST OFFICE BOX)		Delray Beach, FL 33446		<del> </del>	
B. If amending the registered agent and/or registe	ered office a	ddress on our records, enter the	e name of	the new register	
agent and/or the new registered office address her			2021	$\mathcal{O}$	
Name of New Registered Agent:				!	
New Registered Office Address: 15	401 Destiny I		<u></u>		
		Enter Florida street address	$\triangleright$	: ]	
De	elray Beach		da <u>33446</u>	<u> </u>	
		City	2 /	Tip Code	

## New Registered Agent's Signature, if changing Registered Agent:

TWINS96SF LLC

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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n effective date is list ote: If the date inse	ted, the date must be speci erted in this block does date on the Departmen	fic and cannot be pri not meet the app	licable statutory	or more than 90 days a	fter filing.) Pursuan	
	clayed effective date. b	ut not an effective	time, at 12:01 a	m, on the earlier of:	(b) The 90th d	ay aft <b>e</b> r th
ecord specifies a de is filed.	olay <b>o</b> b					