

(Red	questor's Name)	
(Add	iress)	
(Add	dress)	
·	r	
· /Cin	//State/Zip/Phone	- 1 0
(City	//State/Zip/Prione	e # <i>)</i>
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
·	•	,
	cument Number)	
(DOC	zament Namber)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
,	J	
:		

Office Use Only



700361955797

03/16/21--01024--021 **25.00



MAY 2 . 2021

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Unprecedent Signing, LLC (Name 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 2/15/2021 _____ and assigned Florida document number L21000075481 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Unprecedented Signing and Notary Service, LLC The new name must be distinguishable and contain the words "Limited Liability 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) P.O. Box 6185 Oakland Park, Florida 33310 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: 2 4 2 Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida

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.

or, removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address Type of Action		<u>Address</u> <u>Typ</u>		
n/a			□Add			
			□ Remove			
			□Change			
			□Remove			
			□Change			
			□Add			
			□Remove			
			□Change			
			□Add			
			□Remove			
			□ Change			
			□Add			
			□ Remove			
			□ Change			
			□Add			
			□Remove			
			□Change			

n/a					
	<u> </u>				,,,,, ,
					
					
					
					· · · · · ·
					
				7-1	
111					
-	 -				
		-			
					<u> </u>
					
				41	
ctive date, if oth	er than the date of	'filing: ^{n/} a		(optional)	
effective date is listed	d, the date must be speci	ific and cannot be prior	o date of filing or more tha	n 90 days after filing.) Pursi	iant to 605,0
ment's effective d	date on the Departmer	not meet the applicant of State's records.	ble statutory filing requ	irements, this date will r	ot be listed
ord specifies a del	ayed effective date, b	ut not an effective tir	ne, at 12:01 a.m. on the	earlier of: (b) The 90th	day after t
filed.					·
March 3, 2021					
d		·	<u> </u>		
	.100 =) D	110.12		
I AVV		D . KWO	arcu		
	Signatur	of a member or autho	rized representative of a m	ember	