Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000199202 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX TRAINERS INTERNATIONAL CONSULTANTS LLC

Account Number : I20210000123

: (321)315-9576

Fax Number : (321)234-0285

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

imail.	Address:		
ilid L L	Auuress:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **FURNIKOURE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. LEMIEUX

IIIN - 2 2023

37

COVER LETTER

TO: Registration Sec Division of Corp			•	
FURNIKOU SUBJECT:	JRE LLC - ADDRESS UPDA	TE .	•	\$0
SUBJECT:	JRE LLC - ADDRESS UPDA Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	DAVID F ANDRADE AR			
	• • • • • • • • • • • • • • • • • • • •	Name of Person		
	FURNIKOURE LLC			
		Firm/Company		
	1610 W OSCEOLA PKWY	<i>(</i>		
		Address		
	KISSIMMEE FL 34741			
	DOCS@TAXTRAINERSIN	City/State and Zip Code		
		o be used for future annual report nor	ification)	
For further information co	ncerning this matter, please ca	11:		
MIGUEL ROMER		321 315-9576		
Name of	Person	Area Code Daytim	ne Telephone Number	
Enclosed is a check for the	e following amount:			
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	Status &

Malling Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FURNIKOURE LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000079781</u> .	were filed on 02/16/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	llity company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1610 W OSCEOLA PKWY
(Principal office address MUST BE A STREET ADDRESS)	KISSIMMEE FL 34741
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1610 W OSCEOLA PKWY KISSIMMEE FL 34741
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	City Zlp Code

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.

o.	۵	204	50	4

2023-06-01 17:21:52 GMT

13212340285

_____ Change

From: Miguel Romer

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

Title	<u>Name</u>	Address	Type of Action
			DAdd
			□Remove
			□ Change
<u> </u>			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
·			□Add
		\ <u></u>	□Remove
			☐ Change
			□Add
			□Remove
			Change
			□ Add
			(Thomaso

D. If	mending any other information, enter change(s) here: (Attach additional sheets, if necessary,)	
	N/A	
E. Eff	ective date, if other than the date of filing:	
<u>No</u>	effective date is listed, the date must be specific and cannot be prior to date of filing or nest ethan 90 days after filing.) Pursuant to 605 (6). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed intent's effective date on the Department of State's records.	Q07 (3)(m Las the
If the research	cord specifies a delayed effective date, but not an effective time, 4t 12;01 n.m. on the earlier of; (b). The 90th day after to filled.	the
	11 A 17 A 27	
Da	ed JUNE IST 2023	
	Signature of Amember or authorized representative of a thember	
	/ '	