LZ10000090708

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Received
Received 06/23

Office Use Only 5.C. 06(23/21



100363598171

RECEIVED APR 1 2 2021

04/12/21--01027--016 **25.00

© 〒!! 〒D



June 1, 2021

ANGEL L HERNANDEZ 1100 BRICKELL BAY DRIVE APT 26H MIAMI, FL 33131

SUBJECT: DATLETIC LLC Ref. Number: L21000080708

We have received your document for DATLETIC LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Chapter 605, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" of the like from your document.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please catter (850) 245-6050.

Summer Chatham OPS

Letter Number: 221A00011753

(?)

COVER LETTER

TO:

Registration Section

Division of Corpo	orations		
SUBJECT: DA	TLETIC Name of Limit	ited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Eglibeth Data 1100 1	Name of Person HC UC Firm/Company Address Fl 33131 City/State and Zip Code	De Apt 26H
			rication) CL
Ealibeth Sie	cerning this matter, please co	to be used for future annual report notiful: at (K) 498 - 1	387 23
Name of P		Area Čode Daytim	e Telephone Number P 20
№\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	porations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Datletic UC.	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1210000 80 708.	were filed on $2/24/21$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited ligh	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1100 Buckey Bry DR Apt 26H
(Principal office address MUST BE A STREET ADDRESS)	Hami H 33131
Enter new mailing address, if applicable:	1100 Brickell Bay De Apt 26H
(Mailing address MAY BE A POST OFFICE BOX)	Man 4 35/31
B. If amending the registered agent and/or registered office a	(分 address on our records, enter the name of the new registered
agent and/or the new registered office address here:	JUN 2.
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address 2
	. Florida
	City Zip 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.

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
<u> 16R</u>	his E. Guevara	9948 NW 10 TEER	□Add
		Heavi & 33131	ERemove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		· .:	☐ Change
			N □Add
			D □ Remove
			2 □Change
·			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

			 -					
					_			
						<u>-</u> .		
		*, *** * * *				3		 V
					_ .	<u> </u>	2021	₹D
						<u>:</u> :	- JUN	
						<u> </u>	N 23	~
-						_	~ _>	
							=	٦
-						•	<u> </u>	
					•	 .		
rtive date lif o	ther than the da	te of filing:			(optional)		
ffective date is lis	sted, the date must be	specific and cam	not be prior to do	nte of tiling or m	ore than 90 days	s after filing) Pursuant	to 605.0
ment's effective	serted in this block e date on the Depa	rtment of State	's records.	statutory min	g requirement	s, mis date	WIII HOU	oe nstea
ord specities a d filed.	lelayed effective do	ite, but not an e	effective time,	at 12:01 a.m.	on the earlier o	of: (b) Th	ie 90th da	ıy after t
, ;								
1 6 11	7021							
' (80	dure of a memi	1.0		O	0		
			/ _ / / /			<i>/</i>		