LZI 000 138 377

(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:
j
6/8/2 Tm

Office Use Only



300364359873

04/23/21--01022--017 **25.00

21 APR 19 PM 3: 35

COVER LETTER

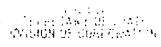
FO: Registration Section Division of Corporations						
ighes						
g UC						
Tomarac FL 33321						
33321 de						
. DW\ ual report notification)						
234 - 3404 Daytime Telephone Number						
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Javan R Hoghes Name of Person						
Certificate of Status & Certified Copy						
stration Section						
sion of Corporations Centre of Tallahassee						

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF CHARLES OF ORGANIZATION OF CHARLES OF CHARLES OF ORGANIZATION OF CHARLES OF CHA OF



21 APR 19 PM 3: 35

(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our rebility Company)	ecorus.)
The Articles of Organization for this Limited Liability Company we	ere filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company here:	
he new name must be distinguishable and contain the words "Limited Liability	y 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 office adagent and/or the new registered office address here:	ldress on our records, <u>c</u>	enter the name of the new registe
igent and/or the new registered since address inve		
Name of New Registered Agent:	•	
New Registered Office Address:		
	Enter Florida street	address
		, Florida Zip Code
	City	24) 00000
New Registered Agent's Signature, if changing Registered Agent:		T. C. all and the second secon
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	e to act in this capacity performance of my duti rovided for in Chapter	'. I further agree to comply with less, and I am familiar with and

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

21 APR 19 PH 3: 35

<u>Title</u>	<u>Name</u>	<u>Address</u>	SI Burney	Type of Action
<u>ambr</u>	Javan R Hughes	S989 Cham	beis St Tamarac	FL 33521 () Add
				□Remove
				Li Change
				[] Add
				□Remove
				[]Change
				□ Add
				□Remove
				🗀 Add
				🗀 Remove
				□Change
· · · · · · · · · · · · · · · · · · ·				∐Add
			<u> </u>	□Remove
				□Change
				🗀 Add
			<u></u>	□Remove
				FlChange

		21 800	
		21 APR 9	PH 3: 3!
			
-			
_			
_			
_			
_			
_			<u>-</u>
			<u>-</u>
_			
_			
_			
_			
_			
			<u> </u>
-			
if an eff	ive date, if other than the date of filing: [cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at If the date inserted in this block does not meet the applicable statutory filing requirements, then it's effective date on the Department of State's records.	itional) fer filing.) Pursi this date will n	nant to 605.020 not be listed a
e recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the carner of: led.	(b) The 90th	n day after the
Dated	Signature of a member or authofized representative of a member July 31 He gives Typed or printed name/of signee		
	Signature of a member or authofized representative of a member		
	·		

Filing Fee: \$25.00