## 12100C139941

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T. MATTHEWS NOV 1 9 2021

## **COVER LETTER**

TO:

	gistration Se vision of Cor				
CHID IFAYE.		D NOW VENTURES LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please returi	n all correspo	ndence concerning this matter	to the following:		
		DANIQUE STEWART			
			Name of Person		
		Then and Now Ventures L	LC		
		Firm/Company	···		
		20411 NE 15th Ave			
			Address		
		Miami, Florida 33179			
			City/State and Zip Code		
		danique.s11@gmail.com			
			to be used for future annual report no	stification)	
For further i	nformation co	oncerning this matter, please co	all:		
DANIQUE	STEWART		786 506-3200 at ( )		
	Name of	l'Person		me Telephone Number	
Enclosed is	a check for th	ne following amount:			
□ \$25.00 l	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)	
	iling Addres		Street Address: Registration S	ection	
Registration Section Division of Corporations		<del>_</del>	Division of Corporations		
	D. Box 632			The Centre of Tallahassee	
Ta	Hahassee, F	·L <i>3</i> 2314	2415 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

21 NOV 10 PH 3: 18

THEN AND NOW VENTURES 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 Florida document number L21000139941	were filed on MARCH 25, 20	and assigned
This amendment is submitted to amend the following:		
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 "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our records, ente	er the name of the new registered
New Registered Office Address:		
	Enter Florida street addr	.622
	City .	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Cuy	isp cone
I hereby accept the appointment as registered agent and agraphovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, o provided for in Chapter 605	and I am familiar with and 5, F.S. Or, if this document is

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 = N AMBR = A	lanager Authorized Member	Address 21 NGV 10 PH 3	y: 18
<u>Title</u>	<u>Name</u>	Address 21 KGV 111	Type of Action
AMBR	VERCINIO ESTIMABLE	146 SW 6TH AVE	<b>\overline{\overlin</b>
		BOYNTON BEACH, FL 33463	□Remove
			☐Change
			□Add
			□Remove
			□Change
			□Add
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ective date, if other than the date of filing: _	(optional) not be prior to date of filing or more than 90 days after filing.) Pursuant to 60:	
reflective date is listed, the date must be specific and can	not be prior to date of filing or more than 90 days after filing.) Pursuant to 60: the applicable statutory filing requirements, this date will not be list	5,020 ted a
cument's effective date on the Department of State	's records.	
·		
poord cranifies a delayed effective date, but not an	effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
is filed.	incerive time, at 12.01 a.m. on the earner on (b) The your day and	
, OCTOBER 04	021	
ted·	·	
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INA		
Signature of a mem	ber or authorized representative of a member	
Signature of a mem	ber or authorized representative of a member	

. , . .

Filing Fee: \$25.00