LZ1000145874

(Re	equestor's Name)	
(Ad	(dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(D	cument Number)	
,		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





300363522083

04/13/21--01026--032 **55.00

001 /PR 13 P 1:59

COVER LETTER

TO: Registration Section

Div	rision of Corp	porations		
		ADE DENTURES LLC	•	4
SUBJECT:		Name of Limit	ed Liability Company	.
The enclosed	d Articles of .	Amendment and fee(s) are subn	nitted for filing.	
Please return	n all correspo	ndence concerning this matter to	o the following:	
		MITCHELL LOVELESS		
			Name of Person	
		READYMADE DENTURE	S LLC	
			Firm/Company	. <u></u>
		901 TOLSON ST SE		
			Address	
		PALM BAY, FL 32909		
			City/State and Zip Code	
		READYMADEDENTURES		
		E-mail address: (to	be used for future annual report notific	cation)
For further i	information c	oncerning this matter, please ca	11:	
MITCHELI	L LOVELESS	5	315 378 8560 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount:		Cla
□ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fees Certificate of Sidus & Certified Copy 25 (additional copy iscenciosed)
Re Di P.e	ailing Addressegistration (ivision of CO). Box 632	Section Corporations 27	Street Address: Registration Sectorial Division of Corporate Centre of Ta 2415 N. Monroe Tallahassee, FL.	orations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

READYMADE DENTURES LLC

(Name of the Limited Liability Company as it now appears on our records.)

TA)	Florida Limited Liability Cor	npany)	
The Articles of Organization for this Limited Liabil Florida document number L21000145874	lity Company were filed	on MARCH 29, 2021	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability comp	any here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company	v," the designation "L1.C" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	DDRESS)		<u> </u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)			
B. If amending the registered agent and/or registagent and/or the new registered office address he Name of New Registered Agent:		our records, enter the na	ame of the new registered
New Registered Office Address:			S
	En	ner Florida street address	
_		Florida	हुँ स्रोत Code
	City		
New Registered Agent's Signature, if changing Registereby accept the appointment as registered ago Provisions of all statutes relative to the proper a	gent and agree to act it nd complete performa	nce of my duties, and I ar	n fa คา iliar with and
accept the obligations of my position as registere being filed to merely reflect a change in the regi. company has been notified in writing of this cha	stered office address, l		

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MITCHELL LOVELESS	901 TOLSON ST SE	■Add
		PALM BAY, FL 32909	□Remove
			□Change
			□Add
			Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			S → □Change
			□ Add
			□Remove
			□Change

				 -	
<u></u>					_
		_		<u> </u>	
					_
					_
					
		<u> </u>			
					_
				<u> </u>	
					_
<u> </u>					
	-				
	<u></u>			-	
				 	
ective date, if other than the d	ate of filing:		(opt	ional) $~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
n effective date is listed, the date must be te: If the date inserted in this blockers.	be specific and cannot be by does not meet the ar	prior to date of filing policable statutory (or more than 90 days afte iling requirements, th	er filing.) Purs <u>pant</u> to i	605.020 listed.a
cument's effective date on the Dep	partment of State's rec	ords.		<u> </u>	- !
				$\bar{\omega}$	****
ecord specifies a delayed effective	date, but not an effecti	ve time, at 12:01 a	m, on the earlier of: (b) The 90th day a	itter th
is filed.					J
, APRIL 9	2021)	59	
ted		/ ·//			
	/1- /		7		
		authorized representa			-

The purpose of this amendment paperwork is to add MITCHELL LOVELESS as an AMBR on READYMADE DENTURES LLC.

Scott Loveless, AMBR

Mitchell Loveless