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07/27/21--01028--002 **25.00





COVER LETTER

TO:	Registration Section
	Division of Corporations

CEPTFY LLC SUBJECT: _____

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Levin Jenes
Name of Person
CERTEN LLL
Firm/Company
SIS E. Las clas Blud STE 120
Address
Furt Lauderdale, Flurida 33301
City/State and Zip Code
INFO a CERTFULLC. COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

021 JU 27 PN 3:2 at (<u>954</u>) <u>549 - 4847</u> Area Code Daytime Telephone Number Kevin Junts Name of Person ;] Enclosed is a check for the following amount: \$25.00 Filing Fee □ \$60.00 Filing Fee. 🗍 \$30.00 Filing Fee & 🔲 \$55.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) . (additional copy is enclosed)

<u>Mailing Address:</u> 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

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION** OF

(FRFFV LLC	
(<u>Name of the Limited Liability Company as it</u> (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fi Florida document number <u>L21000182689</u>	iled on Apr. 1 20 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Com Enter new principal offices address, if applicable:	pany," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	8
	ر. شند هد ه م
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	1844

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida strvet a	ukiress
		_, Florida
	Cin	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>	<u>Name</u>	Address	Type of Action
MGR	Kevin Junes	5200 Sw7th Street	Add
		Plantation FL 33317	Remove
			🗌 Change
<u>(eo</u>	Kevin Jones	5200 Sw 7th Street	TAdd
		Plantation FL 33317	
			Change
			🗆 Add
			🗆 Remove
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		<u> </u>	Change
			🗆 Add
			🗆 Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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tive date, if other than the date of filing:	. ``

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	07/21/2021	
	Kett	-
	Signature of a member or authorized representative of a member	
	Ϋ́, Ϋ́,	
	KEVIN SENES	_
	The standard standard standard standard standard standards	

Typed or printed name of signee.