LZ1000187976

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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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21 SFF = 7 PM 3: 16

COVER LETTER

TO:

Registration Section
Division of Corporations

TOP N	OTCH SFL, LLC		•
	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	Adelice Garcia		
		Name of Person	
	TOP NOTCH SFL, LLC		
		Firm/Company	
	20868 NW 17th Street		
		Address	
	Pembroke Pines, FL		
		City/State and Zip Code	
	info@topnotchsfl.com		
	E-mail address: (to be used for future annual report no	otification)
For further information	on concerning this matter, please c	all:	
Adelice Garcia		954 847-0218	
Nar	ne of Person		me Telephone Number
Enclosed is a check f	or the following amount:		
□ \$25.00 Filing Fe	e ■ \$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)
P.O. Box	on Section of Corporations	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee roe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 $(x_i) = \lambda_i = (x_i) \cdot (x_i) \cdot \left(\frac{x_i}{2} \right)^{\frac{1}{2}} \lambda_i$

TOP NOTCH SFL, LLC

21 SE# -7 PM 3: 16

(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	y were filed on <u>04/22/2021</u>	and assigned
Florida document number L21000187976		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility 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	address on our records, enter t	he name of the new register
agent and/or the new registered office address here:	<u> </u>	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Flor	rida

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 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 SEP -7 Pi 3: 16	Type of Action
AMBR	Paulo R. Santos		□Add
		20868 NW 17th Street, Pembroke Pines, FL 33029	=Remove
			□Change
			🗆 Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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). If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	<u> </u>
	
(If an effective Note: If th	September 1, 2021 (optional) e 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)(see date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: the day after the record is filed.
Dated Sept	ember 1 2021
-	Signature of a member or authorized representative of a member
	Adelice Garcia
-	Typed or printed name of signee