

From:

L21000200601

06/17/2021 15:45:00 0811 P2006/010

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : RICHARD G. COKER, JR., P.A.
Account Number : I20010000145
Phone : (954)761-3636
Fax Number : (954)761-1818

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2021 JUN 11 PM 3:59

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LTF LLC

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2021 JUN 11 PM 3:40

From:

06/11/2021 13:45

#311 P.007/010

H210002316433

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LTF LLC

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:

Raymond Young

Name of Person

LTF LLC

Firm/Company

2816 NE 26 CT

Address

Fort Lauderdale, FL 33306

City/State and Zip Code

ryoungjii@aol.com

Raymond@RSCbpcnts.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raymond Young

954

at ()

Area Code

Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

☒ \$25.00 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)

Mailing Address:

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LTF 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 were filed on April 29, 2021 and assigned
Florida document number L21000200601

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2816 NE 26 CT

(Principal office address MUST BE A STREET ADDRESS)

Fort Lauderdale, FL 33306

Enter new mailing address, if applicable:

2816 NE 26 CT

(Mailing address MAY BE A POST OFFICE BOX)

Fort Lauderdale, FL 33306

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:

Raymond Young

New Registered Office Address:

2816 NE 26 CT

Enter Florida street address

Fort Lauderdale

City

Florida 33306

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 Changing Registered Agent, Signature of New Registered Agent

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From: .

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	Raymond Young	2816 NE 26 CT	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, FL 33306	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ben Fillichio	5400 University Drive, Suite 106	<input type="checkbox"/> Add
		Davie, FL 33328	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: 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 May 28

2021

Signature of a member or authorized representative of a member

Raymond Young

Typed or printed name of signer

Filing Fee: \$25.00

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