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(De	questor's Name)	
(Re	(questors Name)	
/A.	J5	
(Ad	dress)	
	 	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Siling Officer:	
Special restrictions to	r mily Officer.	
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Office Use Only



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09/15/21--01017--017 **30.00

2021 SEP 15 PM 10: 02
SECRETARY OF STATE

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspond	ondence concerning this matter	to the following:		
	Andrea	Name of Person		
		Firm/Company		
	2154 Du	1CK Slough,	Blud Ste 101	
	Uncle 6a E-mail address:	FC 34653 City/State and Zip Code CK6race agn to be used for future annual report not	1911. Com	
For further information c				
Andrew Name o	Deter Person	at (727) 45 Area Code Daytim	7 - 12 95. ne Telephone Number	
Enclosed is a check for th	Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: Andrew Oster Name of Person Firm/Company 2/54 Orch Slongh Blood Stellow Address Trinity FC 34655 City/State and Zip Code Uncle Gac K Grace Ogmail. con E-mail address: (to be used for future annual report notification) formation concerning this matter, please call: Ew Oster Name of Person at (77, 457 - 1295) Area Code Daytime Telephone Number check for the following amount:			
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP 15 PM 10: 02

500 Ver	tures	UC	SECRETARY OF STATE TALLAHASSEE, FLORE
(Name of the Limited L (A F	iability Company : lorida Limited Liab	as it now appears on o ility Company)	ur records.)
The Articles of Organization for this Limited Liabil Florida document number 421003228	ity Company we <u>213</u> .	ere filed on	17/2/ and assigned
This amendment is submitted to amend the following			
A. If amending name, enter the new name of the	limited liabilit	y company here:	
The new name must be distinguishable and contain the words	"Limited Liability	Company," the designal	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	-		
(Principal office address MUST BE A STREET A	DDRESS)		
	_		
Enter new mailing address, if applicable:	_		
(Mailing address MAY BE A POST OFFICE BO)	<u>ro</u> _		
	_		
B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office add ere:	ress on our record	s, enter the name of the new registered
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:		Enter Florida str	vet address
			, Florida
_		City	Zin 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 **Address** Title Name Type of Action MGR Oster, Andrew A 2154 Duck Slong & Bluf add Trinity, Fe 34655 Bremove ☐ Change MGR St (roix, Peggy 2154 Duck Slough Blud The Ste 101 Trinity, FL 34655 DRemove ____ □Add _____ □Remove _____ 🗆 Add □Remove

_____ □Change

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F 6041.	and the Market and the Art of the
Effectiv If an effec	te date, if other than the date of filing: (optional) tive 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 (optional)
Note: 1	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to a state on the Department of State's records.
uotu	is a creetive date on the population of state a records.
e 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
rd is file	d.
	2/13
Dated _	9/17
	Signature of a member or authorized representative of a member Andrew L. 6510 Jr.

Filing Fee: \$25.00