## K21000305135

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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## **COVER LETTER**

TO:

	egistration Se ivision of Cor					
CUDIECT	Reg-Pan Er	nterprises LLC				
SUBJECT	Name of Limited Liability Company					
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	m all correspo	ndence concerning this matter	to the following:			
		Lorie Regas				
			Name of Person		<del></del>	
		Regas Enterprises LLC			2021 OCT 14 PM 4: UZ SECRETARY OF STATE	نازادي
			Firm/Company		BET PET	
		880 Edwards St NE			観す	
			Address		그었다 교	יינ כ
		Palm Bay, FL 32905			STAT E. FL	<u> </u>
		regal.70@live.com	City/State and Zip Code		— m ,	,
			to be used for future annual report notification	1)		
For further	information c	oncerning this matter, please c	all:			
Lorie Rega	ıs		412 759-3580			
Name of Person			Area Code Daytime Telep	phone Numb	er	
Enclosed is	s a check for th	ne following amount:				
□ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	Filing Fee, cate of Status & ed Copy al copy is enclosed	
R D P.	lailing Addres egistration S ivision of C O. Box 632 allahassee, I	Section orporations 7	Street Address: Registration Section Division of Corporat The Centre of Tallah 2415 N. Monroe Stree Tallahassee, FL 3230	assee et, Suite	810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Company as it</u> (A Florida Limited Liability	now appears on our records.)  Company)	<del></del>
The Articles of Organization for this Limited Liability Company were for the Horida document number $\frac{L21000305135}{L21000305135}$	filed on July 2, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability co	ompany here:	
Regas Enterprises LLC		
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable:	S = 202	3
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	1, 0 E 6	
(Mailing address MAY BE A POST OFFICE BOX)	FL CZ	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:  Name of New Registered Agent:	s on our records, <u>enter the name of t</u>	he new regi
		-
New Registered Office Address:	Enter Florida street address	
	, Florida	
Cit	$\overline{Zi}$	Code

## New Registered Agent's Signature, if changing Registered Agent:

Reg-Pan Enterprises LLC

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	Anthony R Pandolph		□Add
		REMOVE	XRemove
			□ Change
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			2021 OCT 14 SECRETARY
<u> </u>			PH L: DANG
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			□Remove

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