## L21000312152

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bocament Namber)
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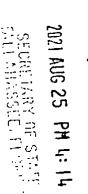
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64/03/2021 TH



## **COVER LETTER**

TO: Registration Sec Division of Corp			
subject: <u>Ма</u> г	ye Lakay	LLC	
SUBJECT: 1 190	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Claudet	fe Tesma Name of Person	
		Firm/Company	
	1010 Pinet	NEE DY Address	
	Lantana	FL 33462 City/State and Zip Code	
	C+esma 95 E-mail address: (1)	to be used for future annual report not	(fication)
For further information co	ncerning this matter, please ca	all:	
ClaudeH	e Tesma		- 9488
Name of	reison	Area Code Dayan	te retephone ivanioei
Enclosed is a check for the	e 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 S		<u>Street Address:</u> Registration Se	ection
Division of Co	orporations	Division of Co.	rporations
P.O. Box 632° Tallahassee, F		The Centre of 7	Fallahassee oe Street, Suite 810
rananassee, r	に リムリ 1サ	2917 N. MONC	DO OTTOL DUITE OTO

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED

2021 AUG 25 PM 4: 14

Maria Lakar	//	JZI AUG ZJ TIT 4° TY
(Name of the Limited Liability Compa (A Florida Limited)	LL U	SECRETARY OF STATE
(A Florida Limited)	Liability Company)	; /
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000312152</u> .	were filed on $07/$	$\frac{68/2021}{}$ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1010 Pir	i FL 33462
(Principal office address MUST BE A STREET ADDRESS)		7 2 33-102
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1010 F Lantan	o Fl 33462
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records	, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	t address
		, Florida
	City	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager

AMBR = A	Authorized	Member
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<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AP	Claudette Tesma	1010 Pinetree Dr	□Add
		Lanteina FL 33462	
			□Change
AMBR	Claudette Tesnia	1010 Pinetree Dr	CP-Add
		Lantana Fl 33462	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	N/A
(If an et <u>Note:</u>	tive date, if other than the date of filing: 07/08/2021 (optional) Tective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
he reco ord is f	rd 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 iled.
Dated	August 23 . 2021.
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	( / 2

Filing Fee: \$25.00