121000352279

(Requ	iestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

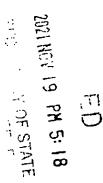
Office Use Only

A. **RIVE**RS DEC - 7 2021



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

PSYCHO CREW 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 v Florida document number $\frac{L21000352279}{L21000352279}$.	vere filed on <u>08/04/2021</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the ab	obreviation "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 adagent and/or the new registered office address here:	ddress on our records, enter the nam	ne of the new registered
Name of New Registered Agent:	r:	2021 NOW 19
New Registered Office Address:	. •	
	Enter Florida street address c, Florida :: City	PH 5 Code
New Registered Agent's Signature, if changing Registered Agent:	•	TE. 8

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>	<u>Address</u>	Type of Action
MGR JHOAM GARCIA		1303 SW 147TH AVEPEMBROKE PINES, FL	
			□Remove
			🗆 Change
MGR WILFREDO RENDEROS	WILFREDO RENDEROS	7581 NW 50TH STMIAMI, FL 33166	≅ Add
			□Remove
			□Change
AMBR JUAN SANCHEZ	7581 NW 50TH STMIAMI, FL 33166	□Add	
			■Remove
			□ Change
			DAdd
			Remove
			©Change
		□Add	
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an effect	ive date is listed, the da	te must be specific a	and cannot be p	rior to date of fil	ng or more than s	(optional) 20 days after filing 2 mants this date	.) Pursuant to 605,0207 will not be listed as
ocumen	t's effective date on	the Department o	f State's reco	rds.	iy miig redan	ments, this date	will not be listed as
record : Lis filec	specifies a delayed ef l.	fective date, but n	not an effectiv	re time, at 12:0	1 a.m. on the ea	arlier of: (b) Th	ie 90th day after the
ated	/15/2021		- <u>`</u>	·			
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