K21000359424

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Cashisas Exiting victims)
(Document Number)
Certified Copies Certificates of Status
Consideration to Filler Officer
Special Instructions to Filing Officer:
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91 SEF 13 PM 1: 32

COVER LETTER

TO: Registration Division of C			
Odyssea SUBJECT:	Arts LLC		
SUBJECT:		nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Eduardo Anacleto (III)		
		Name of Person	
	Odyssea Arts LLC		
		Firm/Company	.
	12906 shady fern In		
		Address	
	gibsonton/Fl.		
	incognegro.artist@gmail.co	City/State and Zip Code om to be used for future annual report noti	itication)
For further information	concerning this matter, please c		
Eduardo Anacleto (III))	407 9064096	
Name	of Person	at ()Area Code Daytim	re Telephone Number
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 Addi Registration	Section	Street Address: Registration Se	
P.O. Box 63	Corporations 327	Division of Cor The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION (7) 18 (1971)

OF

21 SEP 13 PH 1: 32

	2102110
Odyssea Arts LLC	
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	iv as it now appears on our records.)
The Articles of Organization for this Limited Liability Company v	were filed on 8/12/2021 and assigned
Florida document number L21000359424	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	m
(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 ac	ddress on our records, enter the name of the new registered
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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.

Cirv

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 21 SEF 13 PH 1: 32 or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Eduardo Anacleto (III)	12906 shady fern Ln Gibsonton FI 33531	□Add
			□Remove
			≡ Change
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		·	□Change
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- Just need this to be rene	eted in the business records, surns and air.	ئے۔ در
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ective date, if other than effective date is listed, the date	must be specific and cannot be prior to date of filing or more than 90 days at	otional) fter filing.) Pursuant to 605.0
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cora specifies a delayed effe s filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of:	(b) The 90th day after
9/09/2021 ed	12:28pm	
···		
/nex		
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00