## 121000406710

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## **COVER LETTER**

. ,	istration Section ision of Corporations	
•	CEH Strategies, LLC	CUBICAT
Name of Limited Liability Company	Name of	SUBJECT:
d fee(s) are submitted for filing.	Articles of Amendment and fee(s) are	The enclose
•	all correspondence concerning this ma	
lines	Jeremy E Hines	
Name of Person		
gies LLC	CEH Strategies LLC	
Firm/Company	<u></u>	
elia Ave	708 W Amelia Ave	
Address		
33602	Tampa FL 33602	
City/State and Zip Code	**************************************	
	cehstrategies@gmail.com	
E-mail address: (to be used for future annual report notification)		
natter, please call:	formation concerning this matter, pleas	For further i
269 759-9588	nes	Jeremy E H
Area Code Daytime Telephone Number	Name of Person	
iount:	check for the following amount:	Enclosed is
	iling Fee \$30.00 Filing Fee & Certificate of Status	\$25.00
Street Address: Registration Section	iling Address: gistration Section	
Division of Corporations	vision of Corporations	Di
at (	Name of Person  check for the following amount:  filing Fee \$30.00 Filing Fee & Certificate of Status	Enclosed is  S25.00  Ma Re Di P.0

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CEH STRATEGIES, LLC		
(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.) ity Company)	
The Articles of Organization for this Limited Liability Company were	e filed on September 14, 2021	and assigned
Florida document number L21000406710		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
<del></del>		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		i and b
	······	(1)
B. If amending the registered agent and/or registered office addr	ess on our records, enter the name	of the new regis
agent and/or the new registered office address here:		777
		12
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<del> </del>	, Florida	
•	City Tity Tity Tity Tity Tity Tity Tity T	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 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>	Name	<u>Address</u>	Type of Action
P	Jeremy E Hines	708 W Amelia Ave, Tampa FL 33602	<b>=</b> Add
			□Remove
			□Change
			□Remove
			Change
		<del></del>	□Remove
		<b>-</b>	□ Change
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Effective date, if oth fan effective date is liste	ier than the date	of filing: Sept	ember 14, 2021		(optiona	l)	
fan effective date is liste  Note: If the date inse	d, the date must be sp rted in this block d	ecific and cannot oes not meet the	be prior to date of t e applicable statu	filing or more than tory filing requir	90 days after filir ements, this da	g.) Pursuant to 605 te will not be liste	.0207 - ed as 1
document's effective of				, , ,			
	layed effective date	, but not an effe	ective time, at 12:	:01 a.m. on the e	arlier of: (b)	The 90th day after	r the
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rd is filed.	Stona	Ali		esentative of a mea	nber		
e record specifies a del rd is filed.  Dated September 17	Stgna	Ali	or authorized repre	esentative of a mea	nber		