da Department of State **Division of Corporations Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **DELTA 8 RUSH LLC**

Certificate of Status Certified Copy 04 Page Count \$25.00 Estimated Charge

SEP 3 0 2021

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Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DELIA 8 RUSH LLC (Name of the Limited Liability Compa (A Florida Limited)	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{\text{L21000421220}}{\text{L21000421220}}$	were filed on 09/23/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	pility company here:	SUCRETAN OF POSITION OF POSITI
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbre	eviation "L. K." Sign
Enter new principal offices address, if applicable:	221 N 44 STREET	
(Principal office address MUST BE A STREET ADDRESS)	OAKLAND PARK, FL 33334	
Enter new mailing address, if applicable:	PO Box 9319	
(Mailing address MAY BE A POST OFFICE BOX)	Coral Springs FL 33065	
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 registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	2	
	, 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 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
AMBR	RICHARD DELISSER	221 N 44 STREET	□Add
		OAKLAND PARK, FL 33334	□Remove
			⊠Change
AMBR	ANDREA RICO	221 N 44 STREET	🗆 Add
		OAKLAND PARK, FL 33334	□Remove
			∑ Change
			□Add
			Remove
			□Change
			[]Add
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record specifies a delayed eff I is filed.	ective date, but	not an effective	time, at 12:01	a.m. on the earlie	r of: (b) The 90th	i day after t	.he
og/29		_ 2021	<u>-</u> .				
Rilu				tative of a member			

Filing Fee: \$25.00