

L21 000 H2S 846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entry Name)

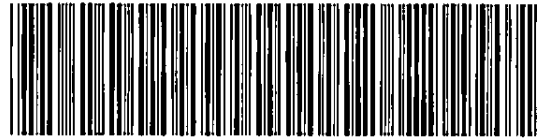
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300429844243

RECEIVED
2024 MAY 20 11:37
SECURITY
FBI

RECEIVED
2024 MAY 20 AM 11:20
FBI
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOFLO JETSKI RENTALS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joshua Fifi

Name of Person

SOFLO JETSKI RENTALS LLC

Firm/Company

5524 Jackson St.

Address

Hollywood FL. 33021

City/State and Zip Code

soflorentalsfl@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason McCree

213 451-7300
at ()

Name of Person

Area Code

Daytime 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SOFLO JETSKI RENTALS 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 were filed on 09/28/2021 and assigned
Florida document number L21000425846.

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 Company," the designation "LLC" or the abbreviation "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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Jason McCree

New Registered Office Address:

5524 Jackson St.

Enter Florida street address

Hollywood

Florida

33021

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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Brandon Sepulveda	1110 Flimmarshee St.	<input type="checkbox"/> Add
		Ft. Lauderdale, FL 33312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Scott Russo	5524 Jackson St.	<input type="checkbox"/> Add
		Hollywood, FL 33021	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Fahad Abdullah	1525 Spring Harbor Dr. APT N	<input checked="" type="checkbox"/> Add
		Delray Beach FL. 33445	<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Jason McCree	101 Diplomat Parkway Apt 2311	<input checked="" type="checkbox"/> Add
		Hallandale Beach, FL. 33009	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Marcell White	101 Diplomat Parkway Apt 2311	<input checked="" type="checkbox"/> Add
		Hallandale Beach, FL 33009	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

Removing 1 Member, Removing 1 Manager, and adding 3 Members.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated April 30, 2024

Joshua Fifi

Typed or printed name of signee