## LZ1 000 436048

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	e)
(D	ocument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to	Filing Officer:	<u>-</u> .
	Q. S	ILAS
	NOV U	8 2021





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10/25/21--01043--009 ++30.00



## **COVER LETTER**

TO:

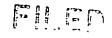
Registration Section

Tallahassee, FL 32314

Division of Co	orporations		
	TERPRISES LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	HARVEY RUBINCHIK.	ESQ	
	<u> </u>	Name of Person	
	HARVEY RUBINCHICK	,PA	
		Firm/Company	
	1860 N. PINE ISLAND R	D SUIT 109	
		Address	
	PLANTATION,FLORIDA	A 33322	
		City/State and Zip Code	<del></del>
	HLRESQ@AOL.COM E-mail address: (	to be used for future annual report no	otification)
For further information	concerning this matter, please c	all:	
HARVEY RUBINCHI	K.ESQ	954 476-7030	
Name	of Person	at () Area Code Dayt:	ime 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)
	Section Corporations	Street Address: Registration S Division of C	orporations
Registration	Section Corporations	Registration S	orporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2021 OCT 25 PH 12: 33

iability Company as it now appears on our records: The Articles of Organization for this Limited Liability Company were filed on  $\frac{0CTOBER}{}$  5, 2021 \_\_ and assigned Florida document number 1.21000436048 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: 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.

City

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	Address	Type of Action
			□Remove
			☐ Change
			□ Add
		<u> </u>	□Remove
			☐ Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change

ROY FOSTER	
8354 NW 65 COURT	
CORAL SPRINGS, FL 33067	
<del></del>	
	<del></del>
	<del></del>
ective date, if other than the day	ate of filing: (optional) se specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
te: If the date inserted in this block	k does not meet the applicable statutory filing requirements, this date will not be listed
cument's effective date on the Department	arthem of State's records.
	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s filed.	
OCTOBER 13	2021
1	
Soft Fin	gnature of a member or authorized representative of a member