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FRUCE 2021

COVER LETTER

TO: Registration S Division of Co			
Active Par	tners LLC		
SUBJECT:		<u>'</u>	
***************************************	Name of Limi	ted Liability Company	
The enclosed Articles of	(Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Carlos I, Mercado		
		Name of Person	
	Active Partners LLC		
		Firm/Company	
	13742 Calera Aly		
		Address	
	Windermere, FL 34786		
		City/State and Zip Code	·
	cayomercadopr@gmail.com		
	E-mail address: (to be used for future annual report notifi	cation) , 2021
For further information	concerning this matter, please co		
Carlos L Mercado		727 2494930	
Name	of Person	at () Area Code Daytime	Telephone Number
			ر جا الله الله الله الله الله الله الله ا
Enclosed is a check for	the following amount:		17. 2
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy gadditional copy is enclosed:	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addr</u>	ess:	Street Address:	
Registration Section		Registration Sec	
	Corporations	Division of Cor	
P.O. Box 63		The Centre of T	affahassee 2 Street, Suite 810
Tallahassee	. 14. 52514	ZH CO IN INIOHIO	COUCCE OUIC OTA

Tallahassee, FL 32303

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

Active Partners LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000441934</u>		10/11/2	<u>U</u> and a	ssigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the des	signation "LLC" or t	he abbreviation "	L.L.C."
Enter new principal offices address, if applicable:			· · · · · · · · · · · · · · · · · · ·	-
(Principal office address MUST BE A STREET ADDRESS)		·	71.65	***
Enter new mailing address, if applicable:			777 . 1	-
(Mailing address MAY BE A POST OFFICE BOX)) - (
B. If amending the registered agent and/or registered office a	address on our rec	cords, enter the	name of the n	ew registe
agent and/or the new registered office address here:				
Name of New Registered Agent:				., .,
New Registered Office Address:		<u>, — </u>		
	Enter Floria	da street address		
	711	Florid		
	City		Zip Code	,
New Registered Agent's Signature, if changing Registered Agent:				

Thereby 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>	Name	Address	Type of Action
MGR	Carlos I. Mercado	13742 Calera Aly Windermere, FL 34786	
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menc's effective date on the	Department of S	tate's records.					
ord specifies a delayed effect filed.	ive date, but not	an effective ti	me, at 12:01	a.m. on the car	lier of: (b)	The 90th di	ay after
October 12		2021	1				
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		1	110-	$\overline{}$			
	Signature of a i	nember or auth	orized represe	ntarive of a memb	oct		-