## L21000458662

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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	5)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Edina Officar	
Special instructions to	Filing Officer.	

Office Use Only



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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor		. L	
SUBJECT:	6P Cha	PS LLC ited Liability Company	
	Name of Lim	iled Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Rosa Parra	
		6P Chaps LLC Firm/Company	
	579 N State	Rd 7, Royal Palm B	each, FL 33411
	Ro	Yal Palm Beach, FL City/State and Zip Code	<u> 33411                                 </u>
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report noti	fication)
Lubar	1 Quiceno	at ( <b>56)</b> 352 4	619
	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
<b>☎</b> \$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 Addres Registration S	_	Street Address: Registration Sec	ction
Division of C	orporations	Division of Cor	porations
P.O. Box 632 Tallahassee, I		The Centre of T	`allahassee e Street Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6P C	<u>haps LLC</u>		<del></del>
(Name of the Limited Liabilit (A Florida	iy Company as it now apper Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability C	ompany were filed on _	10/21/2021	and assigned
Florida document number <u>L21000458662</u>	<u>_</u> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company b	<u>nere</u> :	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the	designation "LLC" or the abi	breviation "L.L.C."
Enter new principal offices address, if applicable:			25
(Principal office address MUST BE A STREET ADDR	ESS)		
	_		. ,
			ΰι
Enter new mailing address, if applicable:			
~			<u>ئن</u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our	records, <u>enter the nam</u>	e of the new register
Name of New Registered Agent:			
New Registered Office Address:	n . n	orida street address	
	Enter Fl	oriau street address	
		Florida	Zip Code
	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
MGR	Luban Quiceno	579 N State Rd7, Royal Polm Beach FL, 33411	<b>■</b> Add
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fective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to ote:  If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.	(optional)  date of filing or more than 90 days after filing.) Pursuant to 605.02 ele statutory filing requirements, this date will not be listed
record specifies a delayed effective date, but not an effective timits filed.	e, at 12:01 a.m. on the earlier of: (b) The 90th day after th
ned <u>Sept 1</u> . 2023	Parus
Signature of a member or author	Paula : and representative of a member