LZI 000475788

(Daywardada Nayra)
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

	Registration ! Division of Co				
enn ir		INESS ENTERPRISES LLC			
SUBJEC	, : <u></u>	Name of Lir	nited Liability Company		
The enclo	osed Articles o	of Amendment and fee(s) are sul	bmitted for filing.		
Please re	tuin all corresp	nondence concerning this matter	r to the following:		
		SPYROS VLAMIS			
			Name of Person		
		AR ACCOUNTING & TA	AX SERVICES INC		
			Firm/Company		
			Address		
		COCONUT CREEK, FL.	33073		
		SPYROS@TAXESAR.CO	City/State and Zip Code M		
		=	to be used for future annual report no	titication)	
For furthe	er information	concerning this matter, please c	alf:		
SPYROS	VLAMIS		954 757-7100 at ()		
	Name	of Person	Area Code Daytii	ne Telephone Number	
Enclosed	is a check for	the following amount:			
■ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addre		Street Address:	vetion	
Registration Section Division of Corporations			Registration Section Division of Corporations		
1	P.O. Box 63	27	The Centre of	Tallahassee	
7	Fallahassee.	FL 32314	2415 N. Monro	be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCB BUSINESS ENTERPRISES 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 11/3/21 and assigned Florida document number <u>L21000475788</u> 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 "LLC" 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: Stephen Barnett Name of New Registered Agent: 2500 NW HO Terr

Emer Florida street address

Sunase Florida 333 22

City Zip Code New Registered Office 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.

Ober Sause ng 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	BARNETT, MARIE	2500 NW 110TH TERR	
		SUNRISE F1, 33322	
		.	☐ Change
MGR	BARNETT, STEPHEN C	2500 NW 110TH TERR	∄Add
		SUNRISE FL 33322	□Remove
			☐Change
			🗆 🗆 🗆 Add
			□Remove
			☐ Change
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Effective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the Defective date.	ck does not meet the a	applicable statuto	(o) ng or more than 90 days a ry filing requirements.	ptional) fier filing.) Pursuant to 605.02 this date will not be listed
record specifies a delayed effective d is filed.	date, but not an effect	tive time, at 12:0	La.m. on the earlier of	: (b) The 90th day after th
Dated APRII, 19	2022	·		
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Dated APRIL 19SexyleyS+4	Buco			