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2022 JAN -4 AMII: 44 SECRETARY OF SEAS

## **COVER LETTER**

	ation Section of Corporations		
	azcez		
SUBJECT:	Name of L	imited Liability Company	<del></del>
The enclosed Arti	icles of Amendment and fee(s) are s	submitted for filing.	
Please return all e	correspondence concerning this man	ter to the following:	
	Matthew Rodriguez		
		Name of Person	
	Armzeez LLC		
		Firm/Company	
	2713 N.E 15th street Un	nit 4	
		Address	
	FT. Lauderdale, Fl 3330	)4	
		City/State and Zip Code	_
	Matthew.Rodriguez1987	@outlook.com s: (to be used for future annual report notification)	_
For further inform	nation concerning this matter, please		
Matthew Rodrigu	teZ.	305 998-8967	
	Name of Person	at ()	nber
Enclosed is a chec	ck for the following amount:		
<b>■ \$25.00</b> Filing	Fee \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	0 Filing Fee, ficate of Status & fied Copy ional copy is enclosed)
	Address:	Street Address:	
•	ration Section of Corporations	Registration Section Division of Corporations	
	ov 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 JAN -4 AMII: 44 SECRETARY OF STATE TALLAHASSEE, FICHT

Armzeez 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 Compa	any were filed on 11/18/2021	and assigned
Florida document number L21000495646		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited I	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4200 Monra	Street
Principal office address MUST BE A STREET ADDRESS		
		· · · · ·
Enter new mailing address, if applicable:	4200 Monroe	Street
(Mailing address MAY BE A POST OFFICE BOX)	Hollywood, FL 3	3021
B. If amending the registered agent and/or registered offi	ce address on our records, enter	r the name of the new registered
agent and/or the new registered office address here:	ce address on our records, enter	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	5.8
		lorida
	Ciņ:	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>	Name	Address	Type of Action
AMBR	Matthew Rodriguez	2713 NE. 15th street Unit4 Ft.Lauderdale,Fl 33304	<b>=</b> Add
			□Remove
			□Add
			□Remove
			□Change
			DAdJ
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
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Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207  Note: If the date inserted in this block does not neet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.  Dated  12/18/2021  Matthew Redriguez.	_	
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Filing Fee: \$25.00