

3/17/22, 2:12 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L2000010061437062

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PHASEAETHETICSLLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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2022 MAR 17 PM 4:55

FILED
2022 MAR 17 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

2022 MAR 18 PM 1:00
T. LEMIEUX

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PHASEAETHETICSLLC

(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 12/14/2021 and assigned
Florida document number L21000527062

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PHASEAETHETICS LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

160 NW 176TH ST UNIT 204

(Principal office address MUST BE A STREET ADDRESS)

MIAMI FL 33169

Enter new mailing address, if applicable:

SAME AS ABOVE

(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:

CAMILA R DE LA CRUZ

New Registered Office Address:

160 NW 176TH ST UNIT 204

Enter Florida street address

MIAMI

City

Florida 33169

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.

Camila R De la Cruz

If Changing Registered Agent, Signature of New Registered Agent

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
MGR	DE LA CRUZ, CAMILA R	6759 NW 182 ST	<input type="checkbox"/> Add
		HIALEAH, FL 33015	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CAMILA R DE LA CRUZ	6761 NW 182 ST APT 103	<input checked="" type="checkbox"/> Add
		HIALEAH, FL 33015	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12 01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated MARCH 16 2022

Candler D De la Cruz
Signature of a member of the

Signature of a member or authorized representative of a member

CAMILA R DE LA CRUZ

Typed or printed name of signer

Filing Fee: \$25.00