# h22000017457

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1	(Requestor's Name	<del>)</del>
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Certified Copies	Certificate	es of Status
Special Instruc	tions to Filing Officer:	
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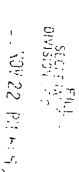
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S. CHATHAM
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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

2022 12 AM 10: 36

September 29, 2022

GIULIANA ROSSI 533 BALMORAL RD WINTER PARK, FL 32789 US

SUBJECT: GENEROUS POUR ECOMMERCE LLC

Ref.|Number: L22000017457

We have received your document for GENEROUS POUR ECOMMERCE LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Corporation, but your entity is a Florida Limited Liability Company. Please complete and return the enclosed blank form(s).

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 122A00021783

### **COVER LETTER**

то:	Registration Section Division of Corporations			
SUBJI	JECT: Gene	rous	Pour	E-commerce LL
	Name of Limited Lie	ibility Compar	ny	
The en	inclosed Articles of Amendment and fee(s) are submitted	for filing.		
Please	e return all correspondence concerning this matter to the	following:		
	ginlia	Name of Perso	RUSS	
	tienero	ul Pol Firm/Compar	ur E-	Commerce LLC
	533 Bau	MOra. Address	e Rd.	<u>-</u>
	Winter	Park 1 /State and Zip	FL 323	789
	E-mail address: (to be us	Sed for future	600 PP annual report i	JUR · COM
For fur	urther information concerning this matter, please call:			
	Giuliana Rossi	., 407	× 25=	+ - 3503
	Name of Person	Area Cod	de Day	time Telephone Number
Enclos	osed is a check for the following amount:			
□ \$2		\$55.00 Filing Certified Co (additional cop	ору	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
				Already Sent
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ro Di Tl 24	ie Centre o	Section Corporations f Tallahassee proe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

generous Pou	ur tiomme	ect llc
(Name of the Limited Liability Company (A Florida Limited Liab	<u>as it now appears on our reco</u> ollity Company)	ords.)
<b>X</b>	, .	
he Articles of Organization for this Limited Liability Company we	ere filed on1/7/2	and assigned
orida document number L 2 20000 17457		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabilit	y company here:	
N PR		200.0
ne new name must be distinguishable and contain the words "Limited Liability	Company," the designation "L	LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	NIA	
Principal office address MUST BE A STREET ADDRESS)		(C)
		22 52
<del>-</del>		Par sign
nter new mailing address, if applicable:	N/A	$\frac{d}{\partial x} = \frac{1}{2} \frac{\partial x}{\partial x}$
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<u>Cr. 11.</u>
during the control of the bony		
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. If amending the registered agent and/or registered office add	iress on our records, <u>ent</u>	er the name of the new registe
. If amending the registered agent and/or registered office add gent and/or the new registered office address here:		
Name of New Registered Agent:	N/A	<u>.</u>
New Registered Office Address:		
New Registered Office Address.	Enter Florida street add	ress
		Florida

#### 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 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>	<u>Name</u>	Address	Type of Action
MUR	Alexander Ammar	15300 Vinola Dr.	🗆 Add
	'	Mont Verde, FL 34756	<b>∑</b> Remove
			□ Change
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fec	live date, if other than the date of filing: $\frac{3/2/22}{\sqrt{122}}$ (optional)		
an ei	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Put If the date inserted in this block does not meet the applicable statutory filing requirements, this date will		
	nent's effective date on the Department of State's records.		
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	th day a	fter the
is f	iled.		
	1 le no lote 15 3 3 7		
ated	November 15 2022		
	farmet -		
	Signature of a member or authorized representative of a member		
	Typed or printed name of signee		