# 122000086092

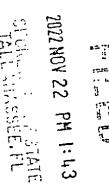
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u>_</u> <u>_</u>

Office Use Only



500398007225

11/22/22 --01010- 013 (\*\*25.60



y 2/4/2023

### **COVER LETTER**

Registration Section

Division of Corporations

TO:

All Da Smo	ke Shop, LLC		
SUBJECT:	Name of Limi	ted Liability Company	<del></del>
The enclosed Articles of <i>i</i>	Amendment and fee(s) are subi	nitted for filing.	
Please return all correspor	ndence concerning this matter t	o the following:	
	Lavell F McKinney, Jr.		
		Name of Person	
	All Da Smoke Shop, LLC		
		Firm/Company	<del></del>
	2610 Marina Bay Drive Ea	st, Apt. 5-503	
		Address	<del></del>
	Fort Lauderdale, FL 33312		
		City/State and Zip Code	<del>_</del>
	Rakiki99@outlook.com		
	E-mail address: ()	to be used for future annual report not	(ification)
For further information co	oncerning this matter, please co	ill.	
Lavell F McKinney, Jr.		786 260-8292 at ()	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$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 Division of C P.O. Box 632	Section Corporations	Street Address: Registration Se Division of Co The Centre of	orporations
Tallahassee		2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 HOV 22 PM

All Da Smoke Shop, LLC					
( <u>Name of the Limi</u>	ted Liability Compan (A Florida Limited Li	y as it now appears on our recability Company)	TALEASSEE.		
The Articles of Organization for this Limited L	iability Company w	vere filed on February 2, 20	222 and assigned		
Florida document number 1.22000086092					
This amendment is submitted to amend the foll	lowing:				
A. If amending name, <u>enter the new name o</u>	of the limited liabil	ity company here:			
The new name must be distinguishable and contain the v	words "Limited Liabilit	y Company," the designation "	LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applic	cable:				
(Principal office address MUST BE A STREI	ET ADDRESS)				
Enter new mailing address, if applicable:		2610 Marina Bay Drive Ec	ıst		
(Mailing address MAY BE A POST OFFICE BOX)		Apt. 5-503			
		Fort Lauderdale, FL 33312	!		
B. If amending the registered agent and/or agent and/or the new registered office addre		ldress on our records, <u>er</u>	iter the name of the new register		
Name of New Registered Agent:	Lavell F McKim	ney, Jr.			
New Registered Office Address:	2610 Marina Ba	y Drive E, Apt. 5-503			
New Registered Office Address:		Enter Florida street address			
	Fort Lauderdale		, Florida <u>33312</u>		
		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 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 ad or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Vida R Hepburn, Jr.	2610 Marina Bay Drive East	□Add
		Apt. 105	≅Remove
		Fort Lauderdale, FL 33312	<b>—</b>
MGR	Lavell F McKinney	2610 Marina Bay Drive East	■Add
		Apr. 5-503	□Remove
		Fort Lauderdale, FL 33312	□Change
MGR	Racquida Williams	856 SW McCall Road	<b>=</b> Add
		Port Saint Lucie, FL 34953	Remove
			[]Change
			□Add
			□Remove
			☐ Change
			□Add
		Remove	
			Change
			□Add
			□Remove
			□Change

					<del></del>
		<u> </u>			
		<del>_</del>			
					<del></del>
		<del></del>	···		
		· · ·			<del></del> -
				<del></del> -	
				···	
				· · · · · · · ·	
	-	· <del></del>	. <u> </u>		<u>.                                      </u>
ffective date, if other than the data an effective date is listed, the date must be some. If the date inserted in this block ocument's effective date on the Department.	specific and cannot be does not meet the a	ipplicable statutoi	ng or more than 90 d ry filing requireme	_ (optional) ays after filing.) Purents, this date will	suant to 605.0207 ( not be listed as t
record specifies a delayed effective d d is filed.	ate, but not an effect	tive time, at 12:0	I a.m. on the earli	er of: (b) The 90	th day after the
November 15th	2022				
	MAI/ 0				
	gnature of a member o	<u> </u>			

Filing Fee: \$25.00