

W22 000116745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

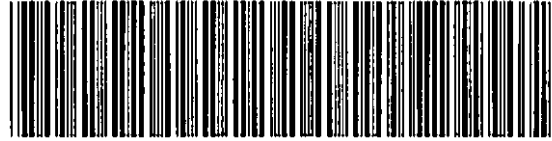
(Business Entity Name)

(Document Number)

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2022 JUN 28 PM 8:24

cf 9/25/2020

**BLAIR M. JOHNSON, P.A.**

ATTORNEY AT LAW  
P. O. BOX 770496  
425 S. DILLARD STREET  
WINTER GARDEN, FLORIDA 34777-0496

(407) 656-5521

FAX (407) 656-0305

**June 21, 2022**

**CERTIFIED MAIL**

**Registration Section  
Division Of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314**

**re: Foxy One, LLC**

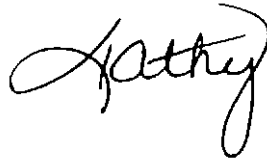
**Dear Reader:**

Enclosed for filing is the original of the Articles Of Amendment. Also enclosed is a check in the amount of **\$25.00** representing payment of the filing fee.

Please file the original Articles Of Amendment and return a filing receipt in the enclosed self-addressed stamped envelope.

Thank you for your courtesies in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Kathy", with a stylized flourish at the end.

Kathy Ann Dickey  
Paralegal to  
Blair M. Johnson, Esquire

kad  
Enclosures

**ARTICLES OF AMENDMENT TO THE  
ARTICLES OF ORGANIZATION OF  
FOXY ONE, LLC**

2022 JUN 28 PM 8:24

The Articles of Organization for this Limited Liability Company were filed on  
March 7, 2022 and assigned Florida document number L22000116745.

This amendment is submitted to amend the following:

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

\_\_\_\_\_  
Enter new principal office address, if applicable:

\_\_\_\_\_  
**MUST BE A STREET ADDRESS**

Enter new mailing address, if applicable:

\_\_\_\_\_  
**MAY BE A POST OFFICE BOX**

B. If amending the registered agent and/or registered office address in  
Florida, enter the name of the new registered agent and/or new registered office  
address:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

New Registered Agent's Signature, if changing Registered Agent:

I hereby am familiar with and accept the duties and responsibilities as registered  
agent for said Company.

C. If amending the 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

Type of Action	Title	Name	Address
1) <input type="checkbox"/> Change	<u>MGR</u>	<u>FABIAN LOJO</u>	<u>7716 Nemours Parkway</u>
<input checked="" type="checkbox"/> Add			<u>Orlando, FL 32827</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

D. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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

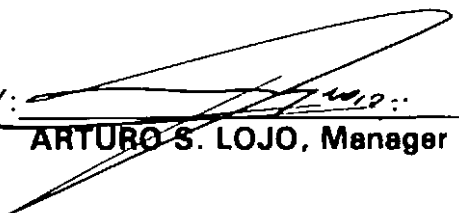
Note: if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Dated: 05/09/2022.

**FOXY ONE, LLC**

BY:   
ADRIAN A. LOJO, Manager

BY:   
ARTURO S. LOJO, Manager