C00188100

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



600397030656

11/03/22--01012--015 **80.00

SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

egistration Section ivision of Corporations

	_	Shade	Culture	ı
	•	Shaue	Culture	L

Name of Limited Liability Company

sed Articles of Amendment and fee(s) are submitted for filing.

urn all correspondence concerning this matter to the following:

		David Yaloz	
		Name of Person	
	,	Shade Culture LLC	
• •		Firm/Company	
		5815 Park Rd	
		Address	
	Fort	Lauderdale, FL 3331	2
		City/State and Zip Code	
		id@Shadeculture.cor	
•	E-mail address: (to be used for future annual report	t notification)
her information co	oncerning this matter, please of	all:	
David	yaloz	at ()	754-214-8463
Name of	f Person		aytime Telephone Number
ed is a check for th	e following amount:		
25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Shade Culture LLC

(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now app Limited Liability Company	ears on our records.)	
ticles of Organization for this Limited Liability C	Company were filed on	March 14th, 2022	and assigned
ı document number <u>L22000128107</u>	<u></u> .		
mendment is submitted to amend the following:			
amending name, enter the new name of the lim	ited liability company	<u>here</u> :	
w name must be distinguishable and contain the words "Lim	ited Liability Company," th	e designation "LLC" or the abb	previation "L.L.C."
r new principal offices address, if applicable:			
ncipal office address MUST BE A STREET ADDR	PECC)		
Capat Office unitiess most be A STREET ADDR			
			·
r r ew mailing address, if applicable:	 		
li a address MAY BE A POST OFFICE BOX)			EC 22
			15 0 m
		·	45 1 1
famending the registered agent and/or registered	l office address on our	records, enter the name	of the new register
t and/or the new registered office address here:			<u> </u>
			STI STI
Name of New Registered Agent:			12 E
Maine of they registered regult.	 		
New Registered Office Address:			
	Enter F	lorida street address	
		, Florida	
	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 is obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being fixed 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.

ved from our records:		
Manager = Authorized Member		t st ee
<u>Name</u>	Address	Type of Action
David Yaloz	5815 Park Rd Fort Lauderdale, FL 33312	2 ≡ Add
	·	_ □Removi
		_ Chang:
		_ □Add
		_ □Remove _
		_ Change
		_ □Add
		_ □Remove
		_ Change .
		_ □Add
		_ 🗆 Remove
:		_ □Change
		_ 🗆 Add
		_ □Remove
		_ Change
		_ 🗆 Add
		_ □Remov.

□ Chang、

						
_						
			-			
		<u>. </u>		_		
			•• ·			
			 .	····		
				••		
						
				<u> </u>		
				_		
			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
tive date is listed, t the date inserted	than the date of fi he date must be specified in this block does not be on the Department	e and cannot be prior tot meet the applic	cable statutory fil	more than 90 days a	otional) fler filing.) Pursuant to this date will not be	605.0207 (3 listed as th
specifies a delay I.	ed effective date, but	not an effective t	ime, at 12:01 a.m	on the earlier of:	(b) The 90th day a	fter the
			_			
) _		
	Signature	of a member or auth	orizad ranga	va of a mambas		
	.ngnature	e member or addi	renzed representati	ic or a memoer		
			d Yaloz			

Filing Fee: \$25.00