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(Requestor's Name)		
(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:  JUN 2 7 2022  A. LUNT		
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(City/State/Zip/Phone #)		
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(Business Entity Name)		
(Document Number)		
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JUN 27 2022		
A. LUNT		

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STORY OF STANDS OF STANDS

## **COVER LETTER**

	Registration Se Division of Cor			
SHRIEC		eals 247, LLC		
SOBJEC	:T:	Name of Lim	ited Liability Company	<del></del>
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Roger Lara		
			Name of Person	
		Constant Deals 247, LLC		
			Firm/Company	
SUBJECT: The enclose Please return Roger Lara Enclosed is  \$\sum_\$ \$25.00				
			Address	<del></del>
		Miami, FL 33175		
			City/State and Zip Code	
		constantdeals247@gmail.co	om to be used for future annual report notific	oution
For furth	er information e	oncerning this matter, please c	·	sation,
Roger La	ıra		305 609-8717	
	Name o	f Person		Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	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		<u>Street Address:</u> Registration Sect	ion
,			Divinian of Com-	

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

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Constant Deals 247, LLC (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 April 11, 2022 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: New Registered Office Address: Enter Florida street address , 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.

City

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
AP	Roger Lara	13300 SW 17th Lane, Apt. 8	□Add
		Miami, FL 33175	≣Remove
			□Change
AMBR	Roger Lara	13300 SW 17th Lane, Apt. 8	
		Miami, FL 33175	□Remove
			Change
			🗀 Add
			□Remove
		<del></del>	□Change
<del></del>			□Add
			□ Remove
			□Change
		<del></del>	
			□Remove
			©Change
			□Add
			□Remove
		4-16-44-1	□Change

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Roger Lara			

Filing Fee: \$25.00