## 422000224218

(Re	questor's Name)	
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www.CorpNet.com



January 4, 2023

Registration Section
Division of Corporations
2415 N. Monroe St., Suite 810
Tallahassee, FL 32303

RE:FullyEquipped416 LLC

To whom it may concern:

The Enclosed Articles of Amendment and Fee(s) are submitted for filing. Also, please find enclosed a check for state filing fees in the amount of \$55.00 made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addressed stamped envelope included.

Sincerely,

Amanda J. Beren, Document Processor CorpNet, Incorporated 888-449-2638 Ext. 105 filings@corpnet.com



## **COVER LETTER**

FULLYEQUIPPED416 LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Amanda J. Beren Name of Person Firm/Company 31416 Agoura Rd., Stc. 118 Address Westlake Village, CA 91361 City/State and Zip Code filings@corpnet.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Amanda J. Beren Name of Person Daytime Telephone Number Enclosed is a check for the following amount: □ \$25.00 Filing Fee □ \$30.00 Filing Fee & ■ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FULLYEQUIPPED416 LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L22000224218	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1518 SE Clearmont St	
(Principal office address MUST BE A STREET ADDRESS)	Port St. Lucie, FL 34983	. 1
		. ,
		:
Enter new mailing address, if applicable:	1518 SE Clearmont St	
(Mailing address MAY BE A POST OFFICE BOX)	Port St. Lucie, FL 34983	
		· ;
		<del>-1</del>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her  Name of New Registered Agent:	ffice address on our records, e	nter the name of the
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	NOELL TAIBBI	1518 SE Clearmont St	
<del></del>			Add
		Port St. Lucie, FL 34983	□ Remove
			L Remove
			Change
AMBR I	KENNETH TAIBBI	1518 SE Clearmont St	
		<del></del>	
		Port St. Lucie, FL 34983	
			L Remove
			Change
			□ Remove
	<del></del>		
			□ Remove
			Change
		-	
<u>-</u>			
			<b>7</b>
			Remove
			Change
			□ Remove

an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after finder: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.  The specifies a delayed effective date, but not an effective time, at 12:01 a.i. The 90th day after the record is filed.	
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January 4th 2023	m. on the earlier o
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Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00