L22000267306

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
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COVER LETTER

TO: Registration Se Division of Cor		1 6	
	rth.Co.LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	2002
	Joseph C Perez		(# # . \2
		Name of Person	. 25
	Survive.Earth.Co.LLC		
		Firm/Company	
	7651 NW 32 Street		_
	1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	Address	
	Davie, Florida 33024		
	survive.earth.co@gmail.cor	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please c	all:	
Joseph C Perez		754 332-5049 at ()	
Name o	of Person	Area Code Daytime Telephone I	Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Co (additional copy is enclosed) Co	0.00 Filing Fee, ertificate of Status & ertified Copy Iditional copy is enclosed)
Mailing Addre Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
Tallahassee,	FL 32314	2415 N. Monroe Street, S Tallahassee, FL 32303	uite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Survive.Earth.Co.LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records.) Liability Company)	,
he Articles of Organization for this Limited Liability Company	were filed on	and assigned
lorida document number L22000267306		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
arvive Earth Co LLC		
e new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	7651 NW 32 Street	. (\frac{1}{2})
Principal office address MUST BE A STREET ADDRESS)	Davie, Florida 33024	
		23
	•	
nter new mailing address, if applicable:	n/a	
failing address MAY BE A POST OFFICE BOX)		
		<i>ယ</i>
If amending the registered agent and/or registered office	address on our records, <u>enter th</u>	ie name of the new registe
ent and/or the new registered office address here:		
N CN. D. sistemul A gamts		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	ida 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.

City

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			□Change
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			DChange
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			□Ĝpange
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ffective date is listed, the	he date must be specific and I in this block does not n	I cannot be prior to o	late of filing or m	ore than 90 days after	r filing.) Pu	irsuant to 60. Il not be lis
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July 18		2022				
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Filing Fee: \$25.00