## L2200270702

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recial Instructions to	Filing Office	r.



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J12/27/2022

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

**EXAMINER'S INITIALS:** 

PLEASE USE FUNDS I	FROM ACCT: 120210000160	AMOUNT: \$25.00
AUTHORIZATION:ORANGE CELOX LLC	21d 5 L22000270792	
Business Name	Document N	umber, (if known):
Walk in		Pick up time
Mail out		Will wait
Photocopy		
Certified Copy of At	rticles of Organization	
NEW FILINGS		<u>AMMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other CORP PLLC		XAmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/RevocationMergerConversionStatement of Correction
OTHER FILINGS	REGIS	STERATION/QUALIFICATIONS
Annual Report		oreign filing imited Partnership
Fictitious Name		einstatement
APOSTIL ( )	Other	

## **COVER LETTER**

TO:

	Registration Se Division of Cor			
, SUBJEC	ORANGE (	CELOX LLC		
SUBJEC		Name of Lim	ited Liability Company	<u></u>
The enclo	sed Articles of z	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspoi	ndence concerning this matter	to the following:	
		Martin E Delloca		
			Name of Person	
		Mdell Consulting Corp		
			Firm/Company	
		848 Brickell Ave Ste 1130		
			Address	<del>-</del> - <del></del>
		Miami. Fl. 33131		
			City/State and Zip Code	<del></del>
		mdelloca@mdellconsulting.	com o be used for future annual report not	***
For furthe	r information co	incorning this matter, please or		meation
Martin E			305 607-3493	
	Name of	Person	at ()	Telephone Number
			riioa oode bayiini	ne recipione (vanioe)
Enclosed i	is a check for the	following amount:		
\$25.0	0 Filing Fee	S30.00 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)
П Р	Mailing Address Registration S Division of Co 2.O. Box 6327 Tallahassee, F	ection orporations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations l'allahassee de Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 DEC 22 PM 12: 26

ORANGE CELOX LLC	
Name of the Limited Liability (A Florida I.	Company as it now appears on our records, SEGRE IN ATTUR STATE Inmited Liability Company)  TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Con	
Florida document number L22000270702	· · · · · · · · · · · · · · · · · · ·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	d liability company here:
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	848 Brickell Ave Stc 1130
Principal office address MUST BE A STREET ADDRE	SS) Miami, FL 33131
Enter new mailing address, if applicable:	848 Brickell Ave Ste 1130
Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33131
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, enter the name of the new register
Name of New Registered Agent: Bluemax	Partners Corp
New Registered Office Address: 848 Bric	sell Ave Ste 1130
	Enter Florida street address
Miami	, Florida <sup>33131</sup>
	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>	Address	Type of Action
AMBR	Guelmos, Walter a	4310 SW 15 St	∏∆dd
		Miami, FL 33134	
			□Change
MGR	MIA BIZ GROUP LLC	848 Brickell Ave Ste 1130	■Add
		Miami, FL 33131	Remove
		-	
		······································	Remove
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			□Remove
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•		ormation, enter change(s) here: (Attach additional sheets, if necessary.)
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Aute: 11 (	ne date inserted in th	the date of filing:
the record sport is filed.	occifies a delayed eff	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated De	c 22	2022
.,	mero	WC.
		Signature of a member or authorized representative of a member
	Martin E Delloca	
		Typed or printed name of signce

Filing Fee: \$25.00