## L22000280779

(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:
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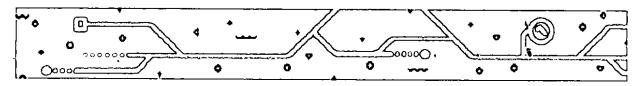


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MISTALL AND STATE

A. BUTLER SEP 17 2022



## zenbusiness

Jun 22, 2022

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: Shattered Vessels LLC

To Whom It May Concern:

Attached please find the executed <u>Articles of Amendment</u>, for the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Attention: Kelly Castro 5511 Parkcrest Dr., Suite 103 Austin Tx 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at <u>fulfillment@zenbusiness.com</u>.

Thank you.

Kelly Castro ZenBusiness Customer Success

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED

Shattered Vessels LLC

2022 JUN 24 PM 3: 39

If Changing Registered Agent, Signature of New Registered Agent

(A Florida Limited)	ny as it now appears on our r Liability Company) IALL	roots DF STATE	
The Articles of Organization for this Limited Liability Company			
Florida document number 1.22000280779			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	18117 Biscayne Blvd		
(Principal office address MUST BE A STREET ADDRESS)	1597		
	Miami, FL 33160		
Enter new mailing address, if applicable:	18117 Biscayne Blvd		
(Mailing address MAY BE A POST OFFICE BOX)	1597		
2	Miami, FL 33160		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street a		
		, Florida	
	City	гір Соае	
New Registered Agent's Signature, if changing Registered Agent:	City	хір Соде	

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>	Name	<u>Address</u>	Type of Action
AMBR	Jonathan Mosery	18117 Biscayne Blvd	□Add
		1597	□Remove
		Miami, FL 33160	Change
			DAdd
			□Remove
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ffect	ive date, if other than the date of filing: (optional) lective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020
an ell ote:	lective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020.  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
<del></del>	ent's effective date on the Department of State's records.
ocum	
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
recor	
recor	led.
recor	
recor	June 22 2022
recor	led.

Filing Fee: \$25.00