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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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COVER LETTER

	Registration Section Division of Corpora	ions		. ;	
SUBJEC	T: <u>Perm</u>	anent Ma Name of Lim	Keup Shop aited Liability Company	210	
The enclo	sed Articles of Amer	dment and fee(s) are sub	mitted for filing.		
Please ret	um all correspondenc	e concerning this matter	to the following:		
			Name of Person Name of Person Agrent Makeur		
	_		13 93 ^{-od} St N		
		<u>ujest</u>	Palm Beach F City/State and Zip Code	EL 33073	
			ax 9 1 9 0 110, o be used for future annual report no		202 SE(
For furthe	r information concert	ing this matter, please ca			7 00 2 00 2 REI
	Pense Stop Name of Perso		at (<u>954)</u> 46 Area Code Daytii	(-732) me Telephone Number	118 PM 2:02
Enclosed i	s a check for the follo	owing amount:)2 (F)
\$25.0	O Filing Fee 🔲	\$30.00 Filing Fcc & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status &

Mailing Address:

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	Teup Shop LLC Iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000 299658</u>	
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 Liabi	lity 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)	Deerfield Boach FL 33442
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	646 Briggwood Lane Deerfield Beach FL 33442
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new register
New Registered Agent: New Registered Office Address: Deer -	Enter Florida street address City Florida City Florida City Florida Florida Florida
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	e performance of my duties, and I am familia 😽 ith and 🥏

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

Hora Gray

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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

	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
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fective date, if other than the d	ate of filing	₁ .			(optional)	
n effective date is listed, the date must be terminated in this block cument's effective date on the Dep	e specific and k does not n	cannot be prior neet the application	able statutory fi	r more than 90 day	s after filing.) P	ursuant to 605,020 If not be listed as
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ecord specifies a delayed effective is filed.	date, but not	an effective ti	me, at 12:01 a.r	n, on the earlier	of: (b) The 9	Oth day after the
ned October 14		2022	<u>-</u> .			
		Λ	_			
aled October 14	ignature of a r	Hnno nember or autho	orized representat	ive of a member		

Filing Fee: \$25.00