

122000302695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

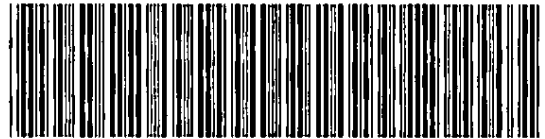
(Document Number)

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2022 OCT 20 AM 9:02

OCT 20 2022

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Crazy Family Core LLC  
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:

Susie Chuen  
Name of Person  
Susie Chuen Consulting LLC  
Firm/Company  
20533 Biscayne Blvd #1326  
Address  
aventura - FL - 33180  
City/State and Zip Code  
suchuen@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susie Chuen at 305 469-6873  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee    ☐ \$30.00 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)

**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

check  
at your  
office

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 10, 2022

SUSAN CHEMEN  
20533 BISCAYNE BLVD  
STE 1326  
MIAMI, FL 33180

SUBJECT: CRAZY FAMILY LOVE LLC  
Ref. Number: L22000302695

We have received your document for CRAZY FAMILY LOVE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Michael A Hall  
OPS Clerk

Letter Number: 522A00022641

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

CRAZY Family Llc -

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 7-6-22 and assigned  
Florida document number L22000302695

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida 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>	<u>Type of Action</u>
<u>MGR</u>	<u>Josefina FERNANDEZ</u> <u>SAN MARTIN (*)</u>	<u>2069 NE 123 ST -</u>	<input checked="" type="checkbox"/> Add
		<u>Miami - FL 33131</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>JOSEFINA FERNANDEZ</u> <u>SAN MARTIN</u> <u>(X) This should be only one word (*)</u>	<u>2069 NE 123 ST</u>	<input type="checkbox"/> Add
		<u>Miami - FL 33131</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>MARIA L. LORENZI</u> <u>FERNANDEZ</u>	<u>2069 NE 123 ST</u>	<input checked="" type="checkbox"/> Add
		<u>Miami - FL 33131</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>MARIA L. LORENZI</u>	<u>2069 NE 123 ST</u>	<input type="checkbox"/> Add
		<u>Miami FL - 33131</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated

MANIA Lorenzi Fernandez.  
Typed or printed name of signee