

L220000321878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

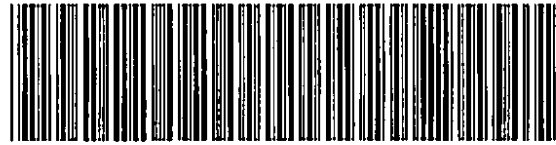
(Document Number)

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22 AUG 29 PM 4:05

CLERK OF COURT  
DIVISION OF COURT CLERK

to Florida Department of State

• Eva Proteman (over letter

Day time telephone

904-994-6673

Return Address

520 SE 5<sup>th</sup> ave apt 220

Fort Lauderdale, FL 33301

Eva B

08/25/2022

151  
DIVISION OF DOCUMENTS  
22 AUG 29 PM 4:05

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 884, 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:

Erica Protzman  
Name of Person

884, LLC  
Firm/Company

520 SE 5<sup>th</sup> ave apt 2210  
Address

Fort Lauderdale, FL 33301  
City/State and Zip Code

yamihaf@hotmail.com  
E-mail address: (to be used for future annual report notification)

22 AUG 29 PM 4:05

STATE OF FLORIDA  
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

Yamil Nüf at ( 904 ) 994-6673  
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

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

884, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 07/20/2022 and assigned Florida document number L22000321878.

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)

22 AUG 29 PM 4:05  
DIVISION OF REVENUE  
STATE OF FLORIDA

**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

Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Yamil Naf	520 SE 5 <sup>th</sup> ave apt 2210 Fort Lauderdale, FL 33301	<input checked="" 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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			<input type="checkbox"/> Change

22 AUG 29 04 4:06  
DIVISION OF CORRECTIONS  
STATE OF FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

All I need to do is add Yamil  
Waf as an owner. I made a mistake  
when creating LLC and only made him  
registered agent. I want him to be  
a registered agent but he is also  
owner of 884, LLC. Thank you!

22 AUG 29 PM 4:06  
DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE

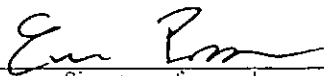
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective 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 605.0207 (3)(b)

**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.

If the record 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 record is filed.

Dated 8/22, \_\_\_\_\_, 2022



Signature of a member or authorized representative of a member

Erica Protzman

Typed or printed name of signee