

L22 000 339 971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

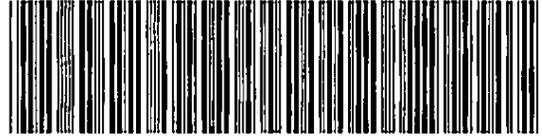
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 OCT -3 AM 8:20
SECRETARY OF STATE
TALLAHASSEE, FL

DEC 21 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOEK'S
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:

JAVORIS D. PHILLIPS
Name of Person

TOEK'S LLC
Firm/Company

1320 N.W. 9TH TERR
Address

FORT LAUDERDALE, FLORIDA 33311
City/State and Zip Code

PHILLIPSTAVORIS1320@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAVORIS D. PHILLIPS at (954) 676-2714
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

TOEK'S LLC

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

FILED

OCT -3 AM 8:21

The Articles of Organization for this Limited Liability Company were filed on 08/02/2022 and assigned
Florida document number 222000339971

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)

1320 N.W 9TH TERR
FORT LAUDERDALE, FLORIDA
33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1320 N.W 9TH TERR
FORT LAUDERDALE, FLORIDA
33311

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:

JAVORIS D. PHILLIPS

New Registered Office Address:

1320 N.W 9TH TERR

Enter Florida street address

FORT LAUDERDALE

City

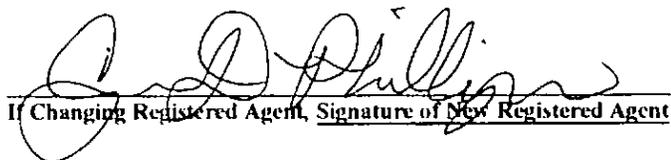
Florida

33311

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>LESLIE ONLEY</u>	<u>6096 BUCKEYE CT, APT A</u> <u>TAMARAC, FL 33319</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
<u>CEO</u>	<u>JAVORIS D. PHILLIPS</u>	<u>1320 N.W. 9TH TERR</u> <u>FORT LAUDERDALE, FLORIDA 33311</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
<u>AMBR</u>	<u>JAVORIS D. PHILLIPS</u>	<u>1320 N.W. 9TH TERR</u> <u>FORT LAUDERDALE, FLORIDA</u> <u>33311</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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