122000421896

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dunings Carin Marra)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

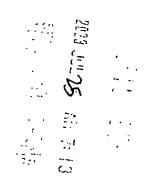
A. RIVERS

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COVER LETTER

TO: Registration S Division of Co			
Fast Custo	m Signs LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing	
	ondence concerning this matter	-	
	PEDRO ROCH		
		Name of Person	
	FAST CUSTOM SIGNS	uc	
		Firm/Company	
	301 SW 1ST AVE #1517		
		Address	
	FORT LAUDERDALE, F	T. 33301	
		City/State and Zip Code	
	PEDRO ROCH@OUTLOC	• •	
For further information of	e-mail address: (concerning this matter, please o	to be used for future annual report notifical:	ncation)
PEDRO ROCH		904 5042753	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	
Registration ! Division of C		Registration Sec Division of Con	
P.O. Box 632	.7	The Centre of T	allahassee
Tallahassee, l	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

rast Custom Signs LLC		
(Name of the Limite)	d Liability Company as it now appears on our A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Lia	bility Company were filed on 09/29/2022	and assigned
Florida document number L22000421896	 •	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of		
Roch Comme	re lic	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
	•	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u>ox</u>)	20
		-: -
B. If amending the registered agent and/or re	distered office address on our records.	enter the name of the new registere
agent and/or the new registered office address		
		· · · · · · · · · · · · · · · · ·
Name of New Registered Agent:		- · · · · · · · · · · · · · · · · · · ·
There are the Transfer of The Aritic		-5.0. ω
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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Change
			□ Add
		·	□ Remove
			
			Remove
			☐ Change
			□ Add
			Remove
			Change
			□Add
			□Remove
			☐ Change
			□ Add
			☐ Remove
			□ Chance

Page 2 of 3

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ffective date, if other than the an effective date is listed, the date in this occurrent's effective date on the	ust be specific and can block does not meet	not be prior to date the applicable s	of filing or more than tatutory filing requi	(optional) 90 days after filing.) Purements, this date will	rsuant to 605.02 I not be listed
e record specifies a delay The 90th day after the re	ed effective date cord is filed.	e, but not an	effective time, a	at 12:01 a.m. on	the earlier
	D	edro Roch			
7/13/2023	, <u>_</u>	·			
ated 7/13/2023	Per	dro Roch			
ated	Per	dro Roch	epresentative of a me	mber	

Page 3 of 3

Filing Fee: \$25.00



August 21, 2023

PEDRO ROCH 301 SW 1ST AVE. # 1517 FORT LAUDERDALE, FL 33301

SUBJECT: FAST CUSTOM SIGNS LLC

Ref. Number: L22000421896

We have received your document for FAST CUSTOM SIGNS 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6353.

Alecia Rivers
Regulatory Specialist III

Letter Number: 123A00019270

SEP 15 2023



August 21, 2023

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Alecia Rivers Regulatory Specialist III

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