

## Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : ELO ENTERPRISES, INC  
Account Number : I20150000109  
Phone : (561)544-8862  
Fax Number : (954)697-0130

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: sales@eloenterprises.us  
ELO ENTERPRISES, INC

2022 NOV -8  
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## TEMUJIN ASSOCIATED, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

C. BRUMBLEY  
NUV - 9 2022

Electronic Filing Menu

Corporate Filing Menu

Help

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

TEMUJIN ASSOCIATED, 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 10/13/2022  
Florida document number L22000440212

STATE OF FLORIDA  
REGISTERED AGENT  
STATE OF FLORIDA  
REGISTERED AGENT  
2022 NOV - 8 PM 12 22

FILED

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*

\_\_\_\_\_ , 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

11/08/2022 14:42

{FAX}

P.003/004

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

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

NA

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	NOVEMBER 8th	2022
		
<i>Denis Leal</i> <i>Black Power Capital Resources, Corp.</i>		
Signature of a member or authorized representative of a member		
BLACK POWER CAPITAL RESOURCES, CORP. by Denis Leal		
Type or printed name of signee		