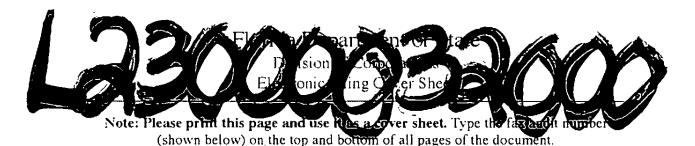
·20: 18506176383 From: 12147128131 Date: 06/07/23 Time: 9:28 PM Page: 01/04



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COOL STUFF E-COMMERCE LLC

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

Electronic Filing Menu Corporate Filing Menu

Help

10N - 9 2023

.To: 18506176383 From: 12147128131 Date: 06/07/23 Time: 9:28 PM Page: 02/04

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COOL STUFF E-COMMERCE LLC			
(Name of the Limited Liab (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)		
The Articles of Organization for this Limited Liability	Company were filed on 01/17/2023	and assigned	
Florida document number L23000032000	·		
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liability company here:		
DEMELLO DEMOLITION LLC			
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or th	e abbreviation "L L.C."	_
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD)	DRESS)		
			_
	<u> </u>		_
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		·-	_
			_
B. If amending the registered agent and/or register	red office address on our records, <u>enter the n</u>	ame of the new regis	terec
agent and/or the new registered office address here	2:	8290	
		;≞	
Name of New Registered Agent:			_
New Registered Office Address:		<i>c</i>	
Title Magnifered William . Maj 1933.	Enter Florida street address	ī	
		5 =	
	, Florida		_
	City	- Zip G od e	

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

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

(((H23000206571 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			CIRemove
			Change
			☐ Change
			□ Add
			□Remove
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To: 18506176383 From: 12147128131 Date: 06/07/23 Time: 9:28 PM Page: 04/04

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conding any (m)	ner miormation, enter ch	ange(s) here: (Attach	odditional sheets, if necessar	y. j

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E. Effective date, if other than the date of filing:

(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 xb)

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 filled.

April 10th	2023
	-
	Bignature of a member for authocated representative of a member
CELSO MEL	LO
	Typed or printed name of signee

Filing Fee: \$25.00

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