## L23000057238

(Red	questor's Name)	
(Add	dress)	
,	,	
(Add	dress)	
(City	y/State/Zip/Phone #)	
()	,, ,	
	WAIT MAIL	
L FICK-OF	MAIL MAIL	
(Bus	siness Entity Name)	
(	,,,,	
(Doc	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to f	Filina Officer:	
_ <b>_</b>		
	NO1-05/27	
<del>-</del>	09(05/2)	ىر
	Onice Use Only	



700413165747

S. CHATHAM SEP - 5 2023

08/02/23--01017--011 \*\*90.00

2901 CER -- 5 FM 3: 39



August 23, 2023

LATITUS SMITH JR 111 NE 1ST STREET 8TH FLOOR #8930 MIAMI, FL 33132

SUBJECT: EVERYTHING MAFIA LLC

Ref. Number: L23000057238

We have received your document for EVERYTHING MAFIA LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6052.

Letter Number: 623A00019553

Octavia L Simmons Supervisor

www.sunbiz.org

## **COVER LETTER**

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Cor	porations	•	
	Mafia LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LaTitus Smith, Jr.		
	-	Name of Person	
	Everything Mafia LLC		
		Firm/Company	
	111 NE 1ST ST 8TH FLOO	OR #8930	
		Address	
	Miami, FL 33132	·	
		City/State and Zip Code	· <del>-</del> ·
	lsmith@everythingmafia.co		
	E-mail address: (	to be used for future annual report notif	fication)
For further information of	oncerning this matter, please ca	all:	
LaTitus Smith, Jr.		850 728-0526 at ( )	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 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)
<u>Mailing Addre</u> Registration		Street Address: Registration Se	ction
Division of C		Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	over it now appears on our records.)		
	Liability Company)		
Articles of Organization for this Limited Liability Company		and ass	igned
rida document number L23000057238			
and document number			
s amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liab	oility company here:		
rything Mafia LLC  new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.	L.C."
	111 NE 1ST ST, 8TH FLOOR #8930	73 SH	•
er new principal offices address, if applicable:	Miami, FL	<del>- <u>F</u></del>	<u>.</u>
incipal office address MUST BE A STREET ADDRESS)		<u> </u>	*
	33132	<del></del>	<del></del>
		بب	. ر دی
ter new mailing address, if applicable:	111 NE 1ST ST, 8TH FLOOR #8930		
ailing address MAY BE A POST OFFICE BOX)	Miami, FL	· —	
	33132	•	

## 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>	Type of Action
AMBR	LaTitus Smith, Jr.	111 NE 1ST ST, 8TH FLOOR #8930	□Add
		Miami. FL	□Remove
		33132	<b>∃</b> Change
			Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			Change
			□Add
			□ Remove
			GChange J₁
			DAdd
			Co □Remove

<del> </del>	<del> </del>				<del></del>
					<del></del>
	<del></del>				
			·		
	<del></del>				<del></del>
<del></del>					
<del></del> ;					
			-		
			<del></del>		<del></del>
		<del></del>			
<del>- · - · · · · · · · · · · · · · · · · ·</del>		· · · · · · · · · · · · · · · · · · ·	·		<del></del>
<u> </u>					
<del></del>					-
·					
			•		
ective date, if othe	r than the date of fil	ling:		(optional)	2023
effective date is listed,	, the date must be specific	and cannot be prior to di	ate of filing or more than 9	0 days after filing.) Pur	suant to 605.0207
cument's effective da	ite on the Department of	ot meet the applicable of State's records.	statutory filing require	ments, this date will	not be listed as
					Ü
cord specifies a dela	yed effective date, but	not an effective time.	at 12:01 a.m. on the ear	rlier of: (b) The 90	th day after the
s filed.					ြို ငှာ
					့် မ
<u>ب</u> ا	ibec 1st	_, <u>2023</u> .			
ed <u>Septem</u>		<del>_</del>	$\sim$ $\sim$		
ed <u>Septem</u>	(2	-, n	1. 1.		
ed <u>Septem</u>	Lati	tus Am	the fire december of a mem	,	