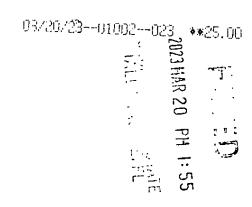
L2300100500

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





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Ch 3/20/2023

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	CE Sign Souch	es LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Cristian	Pa2	
	100	Name of Person	
		Firm/Company	
	2010 Lake	Ellon Dr.	
	ZOTO KAIDS	Ellen Dr. Address	
	Haines City,	FC 33844	
	1	City/State and Zip Code	
	E-mail address: (to be used for future annual report n	otification)
For further information of	concerning this matter, please ca	all:	
Cristian	Paz	(813) 7	78 - 9176
	of Person	at (\$13) 77 Area Code Days	ime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration : Division of C		Registration S Division of C	
P.O. Box 632	27	The Centre of	f Tallahassee
Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E ID

(Name of the Limited Liability Company of the Articles of Organization for this Limited Liability Company we	2023 HAR 20 PM 1:55
(Name of the Limited Liability Company: (A Florida Limited Liab	as it now appears on our records.)
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JALL CALLERT
he Articles of Organization for this Limited Liability Company we	re filed on Fe hwary 24th 2023 and assigned
lorida document number <u>L23000100500</u> .	·
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liabilit	v company here:
CE Sign Source, LLC he new name must be distinguishable and contain the words "Limited Liability"	_
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation "L.L.C."
	. ,
nter new principal offices address, if applicable:	.
Principal office address MUST BE A STREET ADDRESS)	
<u>-</u>	***
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
-	
. If amending the registered agent and/or registered office add	ress on our records, enter the name of the new regist.
gent and/or the new registered office address here:	rest on our records, enter the name of the new regist
Name of New Registered Agent:	
Tanto of from Registered Figure	
New Registered Office Address:	Fire Charles and all and

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.

City

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>	Address	Type of Action
MGR	Cristian Paz	2010 Lake Ellen Dr.	W Add
		2010 Lake Ellen Dr. Haines City, PL 33844	□Remove
			Change
			□Add
			□Remove
		□Change	
			□Add
			□Remove
		□Change	
			□ Add
		□Remove	
			□Add
		□Remove	
			□Change
		□Add	
		.	□ Remove
			Clohaman

	
	<u> </u>
	
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ective date, if other than the date of filing: (optional)	
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date	
rument's effective date on the Department of State's records.	
and an elfore delegate of the form of the boundary of the state of the	. Ook day afaa k
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The stiled.	e 90th day after the
14 1 19 th 2 22	
ned March 19th 2023	
Signature of a member or authorized representative of a member	
Cristian Paz	

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