L23000202030

(Requestor's Name)
(Address)
(1881033)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer





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September 7, 2023

EDDY ROSALES 2921 NW 101 STREET MIAMI, FL 33147

SUBJECT: DIGITAL TANK LLC Ref. Number: L23000202030

We have received your document for DIGITAL TANK LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 123A00020527

* COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Dig	ital Tank Name of Limited	CLC Liability Company	
The enclosed Articles of A	Amendment and fee(s) are submit	ted for filing.	
Please return all correspor	ndence concerning this matter to	the following:	
	Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: Eddy Rosales Name of Person Disital Tank CCC Firm/Company 2971 N.W. Jol 5t Address Aliani Fl 37147 City/State and Zip Code Eddy G Digital Tank Group. Con B-mail address: (to be used for future annual report notification) nformation concerning this matter, please call: Rosales Name of Person at (30) Daytime Telephone Number		
The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: \[\begin{align*} \beg			
			toop. Con
For further information co			r-
Eddy Rosa Name of	Person	at (<u>3 05</u>) <u>188</u> Area CodeDaytime 1	8 0708 Telephone Number
Enclosed is a check for th	e following amount:		
☐ \$25.00 Filing Fee		(1) \$55.00 Filing Fee & Certified Copy	Certificate of Status & Certified Copy

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

) igital 790 K		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number <u>[7] 000 70 20 30</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab Disited Tank C The new name must be distinguishable and contain the words "Limited Liabiletics".		
The new name must be distinguishable and contain the words "Limited Liabil	hty 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)	2/2) Biscay, Miani F/33	e B/vd 132
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	ame of the new registere
Name of New Registered Agent:		
New Registered Office Address:		5.7
	Enter Florida street address	5
	, 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 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
<u>CF0</u>	Tinica Mullings	1931 Acapulco Dr	_ ZAdd
		Miramar F1 3302	3 □Remove
A 1 A			□Change
<u>C10</u>	5 teghen Cook	17640 Rangeland +	V ZAdd
		17640 Rangeland + 0des59 7133556	□Remove
			□Add
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ctive date, if other than the date of filing:	ant to 605.020
ford 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
filed. ed 11/7/2023	
Signatur a pumber or authorized representative of a member	
inginity of a memory addition to representative of a memory	

Filing Fee: \$25.00