## L23000233000

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(-1.7, -1.5.11.7)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
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FEB - 9 2024

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FILED
2023 NOV 13 AM 9: 29
SECRETARY OF STATE

## **COVER LETTER**

	rision of Corp	•	•	
SUBJECT:	AAA ACQI	JISITIONS HOLDING LLC		
SUBJECT:	<del></del>	Name of Lim	nited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspon	ndence concerning this matter	to the following:	
		LUIS A MELLO		
			Name of Person	
			Firm/Company	
		6511 HIGH RIDGE RD		
		<del> </del>	Address	•••
		LAKE WORTH, FL 3346	2	ytime Telephone Number    \$60.00 Filing Fee,   Certificate of Status & Certified Copy (additional copy is enclosed)    Section   Corporations
			City/State and Zip Code	
		atlanticjogos@gmail.com		
		E-mail address: (	to be used for future annual report notif	fication)
For further i	information co	oncerning this matter, please c	all:	
MICHAEL	HAESCHE, (	CPA	646 403-5131	
	Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is	a check for the	e following amount:		
<b>≝ \$</b> 25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee &  Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
	illing Address		Street Address:	<b></b>
	egistration S vision of Co		Registration Sec	
	O. Box 6327	_	The Centre of T	_
	llahassee F			Street Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 NOV 13 AM 9:29

AAA ACQUISITIONS HOLDING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Florida document number L23000233000		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
AAA ACQUISITIONS HOLDINGS LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" o	r 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:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office at agent and/or the new registered office address here:	ddress on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
Name of New Registered Agent:  New Registered Office Address:		
	Enter Florida street address	
	, Flori	
New Registered Office Address:		daZip Code
	, Flori	Zip Code

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>		Address	Type of Action
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	MAY 11			
Tective date, if other than the date must be on effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Department.	ate of filing: e specific and cannot be pr k does not meet the app	rior to date of filing or mo	(optional) re than 90 days after filing.) P requirements, this date wi	ursuant to 605.0207 Il not be listed as
record specifies a delayed effective d is filed.	ate, but not an effective	e time, at 12:01 a.m. or	n the earlier of: (b) The 9	Oth day after the
NOVEMBER 1ST	, 2023	·		
	: mula	<u></u>		
<del></del>	<del>proture of a member</del> or a	athorized representative of	f a member	