## L23000236792

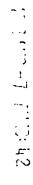
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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09/07/23--01027--006 \*\*30.00



## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: Colinbe	endleenterDrives()	I C		
<u></u>	Name of Lim	ited Liability Company		
	mendment and fee(s) are sub	-		
	C	Name of Person		
	COLINBEA	Name of Person  ADLE ENTERPRISES  Firm/Company	LC	
	11555 Heron P.	Xiy UNI+ 200 Correl S	spings fc, 33076	
	Cerci Springs	FC 33076 City/State and Zip Code		
	Collaborate ent	to be used for future andual report notion	ification)	
For further information con	ncerning this matter, please ca	all:	1.	
Collo Beade	Person	at ( <u>754</u> ) <u>(234)(</u> Area Code Daytin	of-5) ne Telephone Number	
Enclosed is a check for the	following amount:			
□ \$25.00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Se Division of Co P.O. Box 6327	ection prporations	Street Address: Registration Se Division of Col The Centre of 3	rporations	
Taltahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLTUBEADLE FNTERPAZO	SESLLC		
( <u>Name of the Limited Liability Compai</u> (A Florida Limited L	ny as it now appears on our records.)  Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L230x02367-97</u> .	were filed on 05/15/2023 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	Cran Center Executive Sites & Meeting		
(Principal office address MUST BE A STREET ADDRESS)	Craw Center Executive Sites ReMeeting Rooms 1451 W Cypress Creck Rd Ste 300, Fort Lauderdair, FL, 33309		
	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	.:		
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 name of the new registered</u>		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Florida		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		

If Changing Registered Agent, Signature of New Registered Agent

M 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
AP	Colin Beadle	3750 Hulls way Apt 2,	□Add
		3750 Hw 115 way Aprt I, Coral Springs FL, 33065	□ Remove
		Change to MGR	<b>∠</b> Change
			[]Remove
		<del></del>	□Change
			DRemove
		<del></del>	□Change
			□Add;
			Remove
			□Change
			□Add
			Remove
			□Change
<del></del>	<del></del>		□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) \_\_ (optional) 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)(b) 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 filed. Dated July 13th 2023 Signature of a member or authorized representative of a member Colin Becale
Typed or printed name of signee

Filing Fee: \$25.00