# L23000265861

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Gity/State/Zip/Pitche #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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LLC Amena

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### \*\*\*IMPORTANT NOTICE\*\*\*



PLEASE SEND ALL DOCUMENTS –
APPROVED OR REJECTED TO THE ADDRESS
BELOW.

## INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO:

PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

**Division of Corporations** 

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

Inc Authority, LLC 1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Monday, July 24, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For: PICART ENTERPRISES, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

## Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

#### **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJE	ECT: PICART	ENTERPRISES, LLC		
	<u> </u>	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Corpor	ate Maintenance Le	ad
			Name of Person	
		Proc	essing Department	
			Firm/Company	
		•	1450 Vassar St	
			Address	
			Reno, NV 89502	
			City State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		L'annual at traction	A Land Control of the	<del>Z</del>
<b>.</b> .	and the second second		to be used for future annual report noti	neation)
For fur	ther information c	oncerning this matter, please c	an:	
	Process	ing Department	at (800 ) 638-2320	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclos	ed is a check for th	ne following amount:		
☑ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assec, F1, 32314	STREET/COURI Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 33	on rations enter Circle

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

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PICART ENTE			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	inv as it now appears on our records.) ( + 24 × 5.5 ± 1.7 ± 1.7 ± 1.1 ±		
The Articles of Organization for this Limited Liability Company Florida document number L23000265861	were filed on 06/01/23 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Linbi	tity Company." the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	39543 Dawson Chase Dr		
(Principal office address MUST BE A STREET ADDRESS)	Zephyrhills, FL 33540		
Enter new mailing address, if applicable:	39543 Dawson Chase Dr		
(Mailing address MAY BE A POST OFFICE BOX)	Zephyrhills, FL 33540		
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her			
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	. Florida		
<del></del>	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 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
<u>MGR</u>	Jonathan Picart	39543 Dawson Chase Dr	Add
		Zephyrhills, FL 33540	□ Remove
			☐ Change
			Remove
			Change
			Add
			Remove
			Change
			Add
		<del></del>	Remove
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n an em <u>Note:</u>	we date, if other than the date of filing: N/A (optional) retive 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 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated <sub>.</sub>	7/23/2023
	Signature of a member or authorized representative of a member
	Jonathan Picart

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Typed or printed name of signee

Filing Fee: \$25.00