## L23000322697

(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
, i

Office Use Only



500414194205

09/06/23--01011--019 \*\*52.50





## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 26, 2023

BLONDEDY FERDINAND JEAN LOUIS 2241 SW 164TH AVE MIRAMAR, FL 33027

SUBJECT: BLONDELIGHT LLC Ref. Number: L23000322697

We have received your document for BLONDELIGHT LLC and your check(s) totaling \$52.50. 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: 423A00022251

www.sunbiz.org

Division of Commentions D.O. DOV 0997 Wellebosees Florida 90914

## **COVER LETTER**

Division of Cor	porations		
SUBJECT: BLO	IndeLight LLC Name of Limi		
	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	BLondedy	Ferdinand Jean -	Louis
	BL onde	Light LLC Firm/Company	
	2241 SW	164th Ave	
	Miramar, FL	33027 City/State and Zip Code	
	blondody Kerdina. E-mail address: (1	not 5 hop Damail - C. O.	cation)
For further information c	oncerning this matter, please ca		_
Blondely Kan	derland Jean Louis Person	at ( <u>561</u> ) <u>713 –</u> Area Code Daytime	4807 Telephone Number
Enclosed is a check for the	ne following amount:		- - -
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)

Mailing Address:

TO:

Registration Section

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

Blondolight LLC			
( <u>Name of the Limited Liability Comps</u> (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>レ                                   </u>	were filed on <u>07 07 2023</u>	and assign	ed
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 Liabi			
Enter new principal offices address, if applicable:	4400 West Hallando	ale Brac	H Bludts
(Principal office address MUST BE A STREET ADDRESS)	4400 West Hallando Pembroke Park, FL	33023	
Enter new mailing address, if applicable:	2741 SW 164th Miramar, FL 3302	Ave	
(Mailing address MAY BE A POST OFFICE BOX)	Miramar, FL 3302	<u>}</u>	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the nan	ne of the new re	egistered
Name of New Registered Agent:			<u> </u>
New Registered Office Address:	NIA		<u>, 1</u>
	Enter Florida street address	:	- , -
<del></del>	, Florida	Zip Code	<del>!:&gt;</del>
Name Danistana de La casa de la composição de la composiç			<del></del>

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
MGR	Blondedy Ferdinand Jeanlouis	4400 W. Hollandale Bearth Blud#	<u>S</u> ⊠Add
		Dembroke Parts, FL 33023	□Remove
			□ Change
MGR	Veronica Volay	4400 W. Hallandale Beach Bld	#5 \Add
		Pembroke Park, FL 33023	□Remove
			□Change
MGR	Frantz St Cloud	4400 W. Hallandale Buch Blod #5	ZAdd -
		Pembrone Park, FL 33023	
			□ Change
			□Ádd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			ElChange

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NIA E. Effective date, if other than the date of filing: (optional) (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 OCAObu

Filing Fee: \$25.00