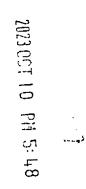
## 123000373079

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

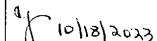


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10.10/20--01013--023 \*\*25.00



Office Use Only



## **COVER LETTER**

381 LLC SUBJECT:	A FLORIDA LIMITED LIABI	LITY COMPANY	
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	James M. Kosmas		
		Name of Person	
	James M. Kosmas, P.A.		
	-	Firm/Company	
	111 Live Oak Street		
		Address	<del></del>
	New Smyrna Beach, FL 3	2168	
		City/State and Zip Code	
	GarryBVargo@gmail.com		
	E-mail address: (	to be used for future annual report notif	ication)
For further information c	concerning this matter, please c	all:	
James Kosmas		386 428-0055 at ()	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

Registration Section Division of Corporations

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

381 LLC, A FLORIDA LIMITED LIABILITY COMPANY

Z023 COT 10 PH 5: 48

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

The Articles of Organization for this Limited Liability Co	ompany were filed on 08-08-	2023 and assigne	d
Florida document number L23000373079	_·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	<u>ed liability company here</u> :		
381 LLC			
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."	•
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		<del></del>	
B. If amending the registered agent and/or registered agent and/or the new registered office address:  Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street address	
	Enter Florida	street address	
		Florida	
Non-Designated Agent's Signature if shanging Dagistared	City		
	City Agent:	, Florida Ζφ Coxle	
New Registered Agent's Signature, if changing Registered  I hereby accept the appointment as registered agent as  provisions of all statutes relative to the proper and con  accept the obligations of my position as registered age  being filed to merely reflect a change in the registered  company has been notified in writing of this change.	City  Agent:  nd agree to act in this cap  mplete performance of my  ent as provided for in Cha	, Florida Zip Code  acity, I further agree to comply w duties, and I am familiar with ar pter 605, F.S. Or, if this documen	ıd

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>	<u>Address</u>	Type of Action
MBR	JOETTE VARGO	29 Fairway Cir	■ Add
		New Smyrna Beach, FL 32168	Remove
			Change
			□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Remove
		<del></del>	Change
			Remove
			☐ Change
			☐ Remove
			☐ Change

•	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
, ,	<b>&gt;</b>
	<del></del>
(If an e <u>Note</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	100tober 4 2023.
	Signature of a member or authorized representative of a member
	Garry Vargo
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00