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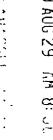
(Requestor's Name)
(Address)
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(Business Entity Name)
(2)
(Document Number)
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: SALTY VIBEZ	LLC
Name of Lin	nited Liability Company
The enclosed Articles of Amendment and fee(s) are sub Please return all correspondence concerning this matter	
<u>Denzell</u>	Name of Person
Salty	Vibez LLC Firm/Company
	43rd St Address
	City/State and Zip Code \$13@gmail. Com (to be used for future annual report notification)
ROCK CI ty	\$13@gmail. Com
For further information concerning this matter, please of	
Denzell Mc (0) Name of Person	at (SOb) S63-S3SU Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

wappears on our records.) inpany) All AHA'Si \sim [17] I on $\triangle \lor g$ 17 $\supset D23$ and assigned
•
I on Avg 11 2025 and assigned
pany here:
y." the designation "LLC" or the abbreviation "L.L.C."
9 SW 43rd ST Re Coral FL 33914
e Coral FL 33914

n our records, enter the name of the new register
the new vegister
nter Florida street address
Florida
Florida 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
AP	Melanie McCoy	1719 SW 43rd S+	□Add
		1719 SW 43rd S+ Cape Coral FL 33914	X Remove
			□∧dd
			□Remove
			□Change
			□Add
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Iecu II t	ve date is his he date ins	sted, the date serted in th	must be specific and c	et the applicable statut	(optional) ling or more than 90 days after filing.) Pursuant to 6 ory filing requirements, this date will not be li
rd sp iled.	ecifies a d	lelayed effe	ective date, but not a	n effective time, at 12:0	01 a.m. on the earlier of: (b) The 90th day af
	Ava	24	th / //	2023	
			Signature of a me	ember or authorized repre	sentative of a member
		_			