L24000009134

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COVER LETTER

TO: Registration Sec Division of Corp		· ·	***	t e
SURFICE: Te	Lix Incorporat	iums L-1 C	*	
<u> </u>	Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspor	idence concerning this matter	to the following:		
	Je(frey	Calix Name of Person		
	Felix Inwo	Firm/Company		
	1021 NE 137 H SI	Address	·	
	N. Mian. FL	33161 City/State and Zin Code		
	Jetter Felix E-mail address: (1			
For further information co	ncerning this matter, please ca	all:		
Jeffrey F	eLix Person	at (786) 6	75-169	٦
Name of	Person	Area Code	Daytime Tele	ephone Number
Enclosed is a check for the	e following amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	:	Street Add	lress:	

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

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

(Name of the Limited Liability Company (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L240000 9134</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
FeLix Incorporations LLC The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1021 NE 137 14 St
(Principal office address MUST BE A STREET ADDRESS)	1021 NG 13714 St North Migni Fl 33161
Enter new mailing address, if applicable:	1021 NE 131/L SI
(Mailing address MAY BE A POST OFFICE BOX)	North Man 66 37161
agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
Name of New Registered Agent:)elf-	rey felix
New Registered Office Address: 1021 NO	Enter Florida street address
Morth N	City Florida 3316) Zip Code
N. B. Carlotte and D. Carlotte	

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	Jeffrey Felix	1021 NE 13714 St	Add
	'	North Minny (EL 3316)	□Remove
			□Change
			□Remove
			□ Add
			□Remove
			□Change
			🖾 Add
			□Remove
			Change
			□Add
			□Remove
			□Change
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			□Remove
			Chang

	
(If an el Note:	ive date, if other than the date of filing:
If the recored is f	rd 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 led.
Dated	4/12/2024
	Signature of a member or authorized representative of a member
	Tette felix Typed or printed name of signee