L24 000 041 869

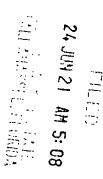
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

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TO: Registration S Division of Co			
FLF ENTE SUBJECT:	ERPRISE LLC		
30 03 EC1.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	•	
	RICARDO CLETO LOP	ES	
		Name of Person	
		Firm/Company	
	2071 PUNCH BOWL AV	Е	
		Address	
	DAVENPORT, FL 33837	7	
	rcletolopes@gmail.com	City/State and Zip Code	
		to be used for future annual report not	ification)
For further information of	oncerning this matter, please c	all:	
RICARDO CLETO LO	PES	321 888-6776	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ction
Division of C	forporations	Division of Cor	rporations
P.O. Box 632 Tallahassee, 1		The Centre of 1 2415 N. Monro	Γallahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLF ENTERPRISE LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recor- liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L24000041869	were filed on 01/22/2024	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLe	C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
· · · · · · · · · · · · · · · · · · ·		
		27
nter new mailing address, if applicable:		3 0
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		25 08
. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, enter	r the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	258
<u></u>	, F	lorida
	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
AMBR	RICARDO CLETO LOPES	2071 PUNCH BOWL AVE. DAVENPORT FL.	338: ∃ Add
			□Remove
			□ Change
			□Add
			🗆 Remove
			Change
<u></u>			□Add
			□Remove
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	01/22/2024
an eff ote:	(optional) Exercise date, if other than the date of filing: (optional) Exercise 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 ment's effective date on the Department of State's records.
l is fi	
hate	06/17/2024
attu	
	7 1 m Lope 11240
	* A compact of a member or authorized representative of a member

Filing Fee: \$25.00