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Division of Corporations

Fax Number

: (850)617-6383

From:

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Account Number : I20008880019
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Email	Address:	

## MARY 22 PH 3: 28 MARY 24 PH 3: 28

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN F&N PRODUCTS LLC

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Help

4.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F & N PRODUCTS LLC		
(Name of the Limited	Liability Company as it now appear Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Lial		
lorida document number L24000151277		and assigned
his amendment is submitted to amend the follow	ing:	
. If amending name, enter the new name of the	ne limited liability company he	<u>re</u> :
he new name must be distinguishable and contain the word	ls "Limited Liability Company," the de	signation "LC" outher abhreviation #11.0"
nter new principal offices address, if applicab	24474 s 1	
Principal office address MUST BE A STREET		
	· ·	
	:	
nter new mailing address, if applicable:		20.
falling address MAY BE A POST OFFICE BO	<u></u>	
5		. FO
		N
If amending the registered agent and/or registered office address h	stered office address on our re	cords, enter the name of the new registe
To District Car Office Additions in	<u>cic.</u>	₩
Name of New Registered Agent:	· •	29
New Registered Office Address:		
	Enter Florida street address	
		, Florida
<del>-</del>	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(5) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

. . . .

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	FRANCYS PEREZ CARDENAS	20739 SW 120 TH PL	
		•	□ Add .
		MIAMI, FL 33177	■Remove
			- Remove
			Change
MGR	FRANCY PEREZ CARDENAS	20739 SW 120 TH PL	-
		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	<b>≅</b> Add
		MIAMI, FL 33177	□Remove
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		-	□Add
			□Remove
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Tective date, if other than mellective date is listed, the date of the date inserted in the cument's effective date on the	the date of filing:  (optional)  must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, is block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
ecord specifies a delayed effe is filed.	C, Colon day Maler
ecord specifies a delayed effer is filed.  04/19 ted	2024
04/19	
04/19	

Filing Fee: \$25,00