

L24 000 171841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

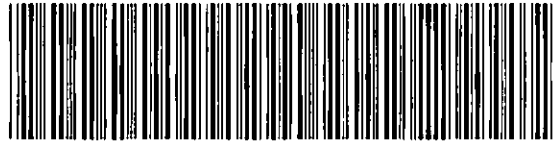
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SECRETARY OF STATE
TALLAHASSEE, FL

2024 AUG 23 PM 4:37

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

AXE INSURANCE AGENCY LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDUARDO MONTEIRO

Name of Person

AXE INSURANCE AGENCY LLC

Firm/Company

2601 NE 18TH ST

Address

POMPANO BEACH, FL 33062

City/State and Zip Code

machadosegurosfl@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDUARDO MONTEIRO

954 254-3217

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SEC. OF STATE
TALLAHASSEE, FL

2024 AUG 23 PM 4: 37

6/17/24

No Check

6/17/24 S.L.

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

AXE INSURANCE AGENCY LLC

(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 Company were filed on 04/11/2024 and assigned
Florida document number L24000171841.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1960 N. Federal Hwy
Pompano Bch, FL 33062

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1960 N. FEDERAL Hwy
Pompano Beach, FL
33062

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:


Eduardo Monteiro

New Registered Office Address:

1960 N. Federal Hwy
Enter Florida street address
Pompano Beach, Florida 33062
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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

MAY 20TH
Dated

2024

Signature of a member or authorized representative of a member

EDUARDO MONTEIRO

Typed or printed name of signee

0th day after
24 AUG 23 PM 4:37
STATE
TALLAHASSEE, FL