L24000231505

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06/10/24--01021--028 **25.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ELEVON CUBS LC 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:
KAREN PARDO Name of Person
El Elyon Cubs LLC Firm/Company
4700 Sw 160th Ave. Apt 423
MIRAMAR, FL 33027 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (862) 391-0395 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigsquare \text{S30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigsquare \text{Certified Copy (additional copy is enclosed)}\$\$\$ 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company of (A Florida Limited Liab	as it now appears on our records.)			
The Articles of Organization for this Limited Liability Company we Florida document number <u>L2400231505</u>	re filed on <u>05–2.0–20</u>	24 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	y company here:			
The new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the new nam	Company," the designation "LLC" or th	e abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	ress on our records, enter the n	ame of the new registered		
Name of New Registered Agent: Same	as previosly	listed		
New Registered Office Address:	Enter Florida street address	·		
	, Florida			
	City , Florida	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree a provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office ad-	rformance of my duties, and I a vided for in Chapter 605, F.S. (m familiar with and Or, if this document is		

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

Title	<u>Name</u>	Address	Type of Action
MGR	KAREN PARDO	4700 SW 160th AVE.	XAdd
		4700 SW 160th AVE. APT 423. MIRAMAR FL	⊡Remove
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			□Remove
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ote: If the date ins	serted in this block doe	s not meet the app	licable statutory filir	ore than 90 days after ig requirements, th	r filing.) Pursuant to e is date will not be	605.020 listed a
cument's effective	e date on the Departme	ent of State's recor	ds.			
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ecord specifies a d is filed.	lelayed effective date, b	out not an effective	e time, at 12:01 a.m.	on the earlier of: ()	5) The 90th day a	itter thi
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ited <u>JUNE</u>	6th	<u>, 202</u>	<u> </u>			
		10	\bigcap			
	Signatu	re of a member or au	Thorized representative	of a member		
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