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FLORIDA FILING & SEARCH SERVICES, INC.

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DATE: 1/6/2025

NAME: ARCADIA FURNITURE OUTLET, LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Registration Section

TO:

Division of Cor	porations			
ARCADIA	FURNITURE OUTLET, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	Rakan Odatallah			
		Name of Person		
	ORANGE FURNITURE (DUTLET, LLC		
		Firm/Company		
	2614 Enterprise Rd	4444		
		Address		
	Orange City, FL 32763			
	INFO@PAYMPS.COM	City/State and Zip Code		
		to be used for future annual report no	tification)	
For further information c	oncerning this matter, please c	all:		
RAKAN ODATALLAH		813 766-9849		
Name o	l'Person	at () Area Code Daytir	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	S30.00 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 Addres Registration S	Section	Street Address: Registration Se Division of Co		
Division of C P.O. Box 632	7	The Centre of	Tallahassee	
Tallahassee, l	FL 32314	2415 N. Monro	be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ARCADIA FURNITURE OUTLET, LLC

2025 JAH - S AM 10: 11

	7 10/28/2024
The Articles of Organization for this Limited Liability Company	were filed on and assigned
Florida document number <u>L24000453743</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	vility company here:
ORANGE FURNITURE OUTLET, LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2614 Enterprise Rd
(Principal office address MUST BE A STREET ADDRESS)	Orange City, FL 32763
	2411 Carrengia > D.A
Enter new mailing address, if applicable:	2614 Enterprise Rd
(Mailing address MAY BE A POST OFFICE BOX)	Orange City, FL 32763
agent and/or the new registered office address here: Name of New Registered Agent:	
N D 1 1067 AN	
New Registered Office Address:	
	Enter Florida street address
New Registered Agent's Signature, if changing Registered Agent:	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agents I hereby accept the appointment as registered agent and agrorovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	Florida City Zip Code Tee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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
			🗖 Add
			□Remove
			□Change
			□ Add
			□Remove
			☐ Change
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			□Change
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			□ Remove
			Change

				
				
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iffective date, if other than t	10/2	8/2024	4	C
fan effective date, it listed, the date n Note: If the date inserted in this locument's effective date on the	nust be specific and cannot block does not meet the	applicable statutory	g or more than 90 days aft	
record specifies a delayed effec d is filed.	tive date, but not an effe	ctive time, at 12:01	a.m. on the earlier of: ((b) The 90th day after th
01/06 Dated	2025	·		
	4	7		
	Ka)	1 -		
	Signature of a member	or authorized represer	ntative of a member	

Filing Fee: \$25.00