## L21000331226

| (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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Office Use Only



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## **COVER LETTER**

| TO: Registration Section Division of Corporations |                   |  |                                       |   |
|---|-------------------|--|---------------------------------------|---|
| SUBJECT: Norms                                    | Manu of Lim       | Penters<br>ired Liability Commany                  | الال                                  |   |
|   | .vanic or Eim     | ned Elabinty Company                               |                                       |   |
| The enclosed Articles of Amendment a              | nd fee(s) are sub | mitted for filing.                                 |                                       |   |
| Please return all correspondence concer           | ming this matter  | to the following:                                  |                                       |   |
|   |                   |  |                                       |   |
|   | Miery 1           | Name of Person                                     |                                       | <del></del>                               |
|   |                   |  |                                       |   |
|   | ums               | Firm/Company                                       | <u>Zentils</u>                        | LLC                                       |
|   |                   | rinieCompany                                       |                                       |   |
| 15-   | 29 (              | COMBS<br>Address                                   | 2                                     |   |
|   |                   |  |                                       |   |
| -   | TLH               | City/State and Zip C                               | 32308                                 |   |
|   |                   |  |                                       |   |
|   | E-mail address: ( | 77 C Yeller<br>to be used for future an            | <u> ひていい</u><br>nual report notificat | ion)                                      |
| For further information concerning this           | matter, please c  | all:   |                                       |   |
| Michael McCana                                    |                   | S CC   | 766- (1)                              | 2.37                                      |
| Michell Norw                                      |                   | Area Code  | Daytime Te                            | lephone Number                            |
|   |                   |  |                                       |   |
| Enclosed is a check for the following a           | mount:            |  |                                       |   |
| [♥\$25.00 Filing Fee ☐ \$30.00                    |                   |  |                                       | □ \$60.00 Filing Fee,                     |
| Certifi   | cate of Status    | Certified Cop<br>(additional copy                  | -                                     | Certificate of Status &<br>Certified Copy |
|   |                   |  |                                       | (additional copy is enclosed)             |
|   |                   |  |                                       |   |
| Mailing Address:                                  |                   |  | et Address:                           |   |
| Registration Section                              |                   | _  | istration Section                     |   |
| Division of Corporations P.O. Box 6327            |                   | Division of Corporations The Centre of Tallahassee |                                       |   |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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

| 11000000 10000   | u 120sters LLE  |
|--|---|
| ( <u>Name of the Limited L</u><br>(A F   | Liability Company as it now appears on our records.) Florida Limited Liability Company) |
| he Articles of Organization for this Limited Liabil                            | ility Company were filed on $\frac{7/7/17}{}$ and assigned                              |
| lorida document number (2   CW33   27  | 26  |
| his amendment is submitted to amend the following                              | ing:  |
| If amending name, enter the new name of the                                    | e limited liability company here:   |
| he new name must be distinguishable and contain the words                      | ls "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."      |
| inter new principal offices address, if applicable                             | le:   |
| Principal office address MUST BE A STREET A                                    | ADDRESS)  |
|  |   |
| inter new mailing address, if applicable:                                      |   |
| Mailing address MAY BE A POST OFFICE BO.                                       | <del></del>   |
| naturing address SIAT BE A FOST OFFICE BO.                                     | <u> </u>  |
|  |   |
| 3. If amending the registered agent and/or regis                               | istered office address on our records, enter the name of the new reg                    |
|  | <u>nere</u> :   |
|  | nere:   |
| Name of New Registered Agent:  | nere:   |
| gent and/or the new registered office address h                                | Enter Florida street address  |
| gent and/or the new registered office address he Name of New 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> | Name           | <u>Address</u>                        | Type of Action |
|--------------|----------------|---------------------------------------|----------------|
| AMBR         | Michael Norman | 1529 Coombs dr.                       | 🗆 Add          |
|              |                | TLH FL 32306                          | □Remove        |
|              |                |                                       | ØChange        |
|              |                | <del> </del>                          | □Add           |
|              |                |                                       | □Remove        |
|              |                | · · · · · · · · · · · · · · · · · · · | □Change        |
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|              |                |                                       | □Remove        |
|              |                |                                       | ПСватие        |

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. Signature of a member or authorized representative of a member Typed or printed name of signee