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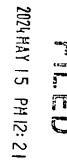
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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03/20/24--01014--017 **60.00





April 3, 2024

ADEA MCKNIGHT 65 SW 12TH AVENUE APT 406 DEERFIELD BEACH, FL 33442

SUBJECT: FEDERAL BRIDGE SOLUTIONS LLC

Ref. Number: L24000070534

We have received your document for FEDERAL BRIDGE SOLUTIONS LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Kiora Hester Regulatory Specialist II

Letter Number: 024A00007155 RECEIVED

MAY 15 2024

2024 HAY 15 PM 12: 21

COVER LETTER

TO: Registration Section Division of Corpo				
SUBJECT: Fed	Pertel Bridge Name of Lin	2 SEAL/HDI75 LL nited Liability Company	. <i>C</i>	
	nendment and fee(s) are sub	_		
		Name of Person		
	Federal Bi	Firm/Company	<u>'</u>	
	65 SW 12+	Address Apt	406 2024 HAY	•
	Deerfield B Supportation	City/State and Zip Code City/State and Zip Code Cler Co 1 DT dge Schr To be used for future annual report not	406 83442 HO75/1c. Com fication) 7 3 21	
For further information con-	cerning this matter, please c	all:	<u>. 10</u>	
/+ dea MCk Name of P	nigh+	at (<u>754</u>) <u>264</u> Area Code Daytim	- 8036 e Telephone Number	
Enclosed is a check for the	following amount:		/	
□ S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fcc, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address:		Street Address:		

Registration Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Federal Br	idae Solutions LLC. Liability Company as it now appears on our records.) A Florida Limited Liability Company)				
(Name of the Limited	V Florida Limited Liability Company)				
The Articles of Organization for this Limited Lial	bility Company were filed on 02/07/202	ا an	d assig	gned	
Florida document number <u>L24000070</u>	534.				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liability company here:				
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the a	bbreviatio	ın "L.L	.C."	
Enter new principal offices address, if applical	ole:		202		<u>, </u>
(Principal office address MUST BE A STREET	ADDRESS)				
					•
Puton non malling add and to a start to		ξ <u>ή</u> -	P ===	\Box	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	0Y)	-0	<u> </u>	-	
Training Guaresa MART BE AT OUT OF THEE BY	<u> </u>	. :	~		
agent and/or the new registered office address			_		<u>-ec</u>
Name of New Registered Agent:	Murad Stokes				
New Registered Office Address:	Murad Stokes 65 SW 12th Avenue, Apt Emer Florida surcei address	406			
	Deer Field Beach , Florida_	334 Zip C	42 iode		
New Registered Agent's Signature, if changing Re	gistered 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	Address	Type of Action
MCR	Adea McKnight	65 SW 12th Avenue Apt 40	<u>b</u> □Add
	ý	Deerfield Beach, FL, 3344.	□Remove
			🖸 Change
MOR	Murad Stokes	65 SW 12th Avenue Apt 40	<u>b</u> DAdd
		Decified Beach, FL 3341	2 □Remove
			©Change
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lf an effective Note: If th	e date is listed, the se date inserted i	han the date of date must be specing this block does on the Department.	ific and can	the applicat	date of filing o	or more than 90 iling requires	(options) days after fili nents, this da	ng.) Pursuan	t to 605.6 be liste	0207 (d as tl
e record spe ed is filed.	ecifies a delayed	l effective date, t	out not an e	effective tim	e, at 12:01 a.	in, on the car	lier of: (b)	The 90th d	ay after	the
Dated	4/24/	24			. •					
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Filing Fee: \$25.00