

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
C
Special Instructions to Filing Officer.





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05/27/25--01012--011 **25.00



COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divi	ision of Cor	rporations					
eun iezer.	RocketLife	e Resources					
SUBJECT:	Name of Limited Liability Company						
The enclosed	Articles of	Amendment and fee(s) are sub-	omitted for filing.				
Please return	all correspo	ondence concerning this matter	to the following:				
		James Armstrong					
			Name of Person				
		-	Firm/Company				
2490 Dividing Creek Path Address							
Address							
The Villages, FL 32162							
			City/State and Zip Code				
		james@simplyarmstrong.c	om to be used for future annual rep	ort notification)			
For further in	iformation c	oncerning this matter, please c					
James Armst	trong		719 432-9				
Name of Person		Area Code	Daytime Telephone Number				
Enclosed is a	check for th	ne following amount:					
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
	ling Addres		<u>Street Addr</u> Registrati	ess: on Section			
Div	ision of C	orporations	Division of	f Corporations			
P.O	. Box 632	:7	The Centr	e of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RocketLife Resources LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited)	ny as it now appears on our reco liability Company)	ords.)	
The Articles of Organization for this Limited L	iability Company	were filed on April 09, 2021	and assigned	
Florida document number 1.21000164646	·			
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The Pathway Publishing LLC				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applic	rable:		3	
Principal office address MUST BE A STREET ADDRESS)		333 Colony Blvd, #308	ì	
		The Villages, FL 32162		
)	
Inter new mailing address, if applicable:		333 Colony Blvd, #308	:	
Mailing address MAY BE A POST OFFICE	BOX)	The Villages, FL 32162	· ·	
			;	
3. If amending the registered agent and/or i gent and/or the new registered office addre		nddress on our records. <u>ent</u>	er the name of the new regis	
Name of New Registered Agent:	James Armstro	ng	···	
New Registered Office Address:	stered Office Address: 333 Colony Blvd. #308			
		Enter Florida street add	Pens	
	The Villages		Florida 32162	
		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

'If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			
		 	□Remove
			□Change
			□Add
			☐ Remove
			□Change
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(If an effective Note: 1	re date, if other than the date of filing:
he record ord is file	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 d.
Dated_	16 May 2025.
	Storature of a member or authorized representative of a member