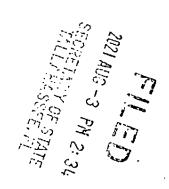
## 

(Requestor's Name)
(Address)
(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:

Office Use Only





## **COVER LETTER**

TO: Registration S Division of Co					
	Later LLC				
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	David S. Delrahim				
	-	Name of Person			
	Englander Fischer			2021 S.F.	
		Firm/Company		图 是	7
	721 1st Avenue N			-1	
		Address		100 P	1 8
	St Petersburg, Fl. 33701			-3 PH 2: 34	S.
		City/State and Zip Code		TE 34	
	dturner@eflegal.com	to be used for future annual report notif	·		
For further information	concerning this matter, please co		ication)		
David S. Delrahim		727 898-7210 at ( )			
Name	of Person	Area Code Daytime	Telephone Number	<u> </u>	
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Thank Me Later LLC			
(Name of the Limited Liability Compan (A Florida Limited L	iy as it now appears on iability Company)	our records.)	-
The Articles of Organization for this Limited Liability Company villorida document number L21000315314	were filed on July 9, 3	2021 and a	ssigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
Thank Me Later Again LLC			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the design	ation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			707
Enter new mailing address, if applicable:		أحرارا	)
	<del> </del>	<u> </u>	<del>2 }</del>
(Mailing address MAY BE A POST OFFICE BOX)			
			<del>? *•</del>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our recor		<u>ಎ</u> tew registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida s	reet address	
		, Florida	
	City	Zip Cod	le
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as paceing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my rovided for in Chap	duties, and I am familiar v oter 605, F.S. Or, if this do	with and ocument is

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>	<u>Name</u>	Address	Type of Action
			Add
			□Remove
			□Change
			□ Add
			□Remove
			□ Change
			DRemove
			PAdd
			□Remove
		<del></del>	□Change
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Effective date, if other than the of an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and ock does not m	cannot be prioneet the applic	r to date of filin	g or more than 900 of filing require	(optio days after the nents, this	iling.) Pur	suant to not be	605.0207 ( listed as t
record specifies a delayed effective d is filed.	date, but not	an effective t	ime, at 12:01	a.m. on the ea	lier of: (b)	The 90	th day a	ifter the
July 29 Dated		2021						
/acc	······································		-)					
					>			

Filing Fee: \$25.00