

L22000178842

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 1611 Holdings LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sara Bytheway
Name of Person
Law Office of Marc A. Austin, P.C.
Firm/Company
3521 North University Avenue #200
Address
Provo, UT 84604
City/State and Zip Code
1611holdings@gmail.com
E-mail address: (to be used for future annual report notification)

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TALLHASSEE, FL

For further information concerning this matter, please call:

Sara Bytheway at (801) 374-8925
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
 \$30.00 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 Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
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**

1611 Holdings LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 14, 2022 and assigned Florida document number L22000178842.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

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, 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	450 Holdings LLC	271 E 450 N	<input type="checkbox"/> Add
		Lindon, UT 84042	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Leroy Development	1611 E. 2450 S. #5B	<input type="checkbox"/> Add
		Saint George, UT 84780	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Robert Knowlton	3565 S. Castlefield Dr.	<input type="checkbox"/> Add
		Washington, UT 84780	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Garret Steed	11104 Indian Oaks Drive	<input type="checkbox"/> Add
		Tampa, FL 33625	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Kylie Steed	11104 Indian Oaks Drive	<input type="checkbox"/> Add
		Tampa, FL 33625	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joseph McCord	271 East 450 North	<input checked="" type="checkbox"/> Add
		Lindon, UT 84042	<input type="checkbox"/> Remove

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