L22000296500

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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

Registration Section Division of Corporations

TO:

Adkison Co	ppy & Content LLC		
30b) EC 1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Olivia Adkison		
		Name of Person	
	Adkison Copy & Content	LLC	
		Firm/Company	
	110 Meadowbrook Ct.		
		Address	· · · · · · · · · · · · · · · · · · ·
	Niceville, FL 32578		
		City/State and Zip Code	
	olivia@helloliftoff.com		
	E-mail address: (to be used for future annual report not	tification)
For further information c	onceming this matter, please c	all:	
Olivia Adkison		513 706-3512	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 5 Division of C P.O. Box 632 Tallahassee, 1	Section orporations 7	Street Address: Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)		
)		
The Articles of Organization for this Limited Liability Company were filed on 2	14/01/2023	an	nd assigned
Florida document number L22000296500			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company	<u>here</u> :		
Hello Liftoff LLC			
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or t	the abbreviati	on "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			Ş
Timeya office dadress MOST DE A STREET ADDRESS		<u>_</u>	= 7
			E
			ر . ا
Enter new mailing address, if applicable:	 	<u>: </u>	-
Mailing address MAY BE A POST OFFICE BOX)			<u>ن</u>
			-

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Parson(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
			Петюче
			□ Change
			□Add
			□Remove
			☐ Change
			⊡Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			⊡Add
		<u></u>	□Remove
			□Change

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and I would like it to be "Hel	lo Liftoff LLC".		
			
			
			
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			· · · · · · · · · · · · · · · · · · ·
affective date, if other than the	date of filing:	(optional)
Affective date, if other than the an effective date is listed, the date mus Note: If the date inserted in this bl	t be specific and cannot be prior to dat	te of filing or more than 90 days	s after filing.) Pursuant to 605,0207
locument's effective date on the D		statutory ruing requirement	s, this date will not be fisted as
e record specifies a delayed		effective time, at 12:	01 a.m. on the earlier of
The 90th day after the rec	ord is filed.		
Dated May 30	2023		
Dated May 30 Min Wh			
() MM () L	1		
	Worl)		