(Re	equestor's Name)	
	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	Registration Section Division of Corpor		41	
SUBJI	ECT:	The R	E Store Tally, ted Liability Company	LLC
The en	closed Articles of Ame	endment and fee(s) are subi	nitted for filing.	
Please	return all corresponde	nce concerning this matter t	to the following:	
		KR	LIGTEN KENNER Name of Person	
		17-1e	RE Store Tal	ly, LLC.
		- 8879 L	LEE RELVES Rd	
		Talla	MUSICE FL 3	30309
	-	E-mail address: (t	City/State and Zip Code Store tally a go o be used for future annual report for	naul. COM ification)
For fu	ther information conce	erning this matter, please ca	_	
	Krister Name of Per	N Kenney		3-6747 ne Telephone Number
Enclos	ed is a check for the fo	ollowing amount:		
⊠ \$2	5.00 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 Sec	tion	Street Address:	ution

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

The REG	tore Tally LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	nv as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L25000357536</u> .	were filed on $8 4/2025$ at	nd assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviat	ion "L.L.C."
Enter new principal offices address, if applicable:	: . •	A
Principal office address MUST BE A STREET ADDRESS)		6 2
	21	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	≯•	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of t</u>	he new registered
Name of New Registered Agent:	ura Kenney	
New Registered Office Address:	U LCC KCLUCS [20] Enter Florida street address	
Tal	Lange Gland Sect dual Est	309 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 Régistered 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
MGR	Kristen Kenney	2019 Lee Recus Rd	[\$Add
		Tallalius See Fi Sig	Remove □
		•••	Change
AMBL	Andrew Linn	8879 Lee Reeves Rd	
		Tallahasser FL 3230	(Y) / □Remove
			Y Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Chango

ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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te:	ive date, if other than the date of filing: Coptional Coptional
ecor is fil	d 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
ted .	8/25/25
	Signature of a member or authorized representative of a member
	Laura Kenney Typed or printed name of signce