## L04000042735

(	Requestor's Name)
(	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



600394914226

09/29/22--01001--013 \*\*25.00

2022 SEP 28 AM 8: 57

2022 ME 28 PH 3: L

A. EUT . . . SEP 2 9 2022

## **COVER LETTER**

ŢO:

TO: Registration S Division of Co			
Nancy D. S	Stephens & Associates, LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jack E. Kiker, III, Esq.		
		Name of Person	
	Williams, Gautier, Gwynn,	, DeLoach & Kiker, P.A.	
		Firm/Company	
	2010 Delta Boulevard		
		Address	
	Tallahassee, FL 32303		
	jake.kiker@williamsgautier	City/State and Zip Code	
		to be used for future annual report notification)	
For further information	concerning this matter, please co	all:	
Jack E. Kiker, III, Esq.		850 386-3300 ext 122	
Name	of Person	Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filin Certified Copy (additional copy is enclosed) Certified Co (additional copy  Certified Copy  Certified Copy (additional copy  Certified Copy  Certified Copy (additional copy  Certified Copy  Certified Copy (ad	of Status &
Mailing Addra Registration Division of ( P.O. Box 63 Tallahassee,	Section Corporations 27	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

ED ED

Nancy D. Stephens & Associates, LLC

2022 SEP 28 AM 8: 57

(Name of the Limited Liab (A Flori	ility Company as it now appears ida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability			d
Florida document number L04000042735	<del></del> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company her	<u>re</u> :	
Ascension Management, LLC			
The new name must be distinguishable and contain the words "l.	imited Liability Company," the de	esignation "LLC" or the abbreviation "L.L.C."	1
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable:	<del>_</del>		
(Mailing address MAY BE A POST OFFICE BOX)			
D. M. C.			
B. If amending the registered agent and/or register agent and/or the new registered office address here		ecords, enter the name of the new reg	<u>zistered</u>
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Flori	ida street address	
		, Florida	
	City	, Florida	
New Registered Agent's Signature, if changing Register	red Agent:		
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this change	l complete performance of i agent as provided for in C cred office address, I hereb	my duties, and I am familiar with an Chapter 605, F.S. Or, if this documen	ıd

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
	<del></del>		□Add
			□ Remove
			□Change
			\ \ \ \ \ \ \ \ \
		· · · · · · · · · · · · · · · · · · ·	
			□Change
			□Add
			□Remove
			□Change
		-	
		<del> </del>	□Remove
			□ Change

				<del>-</del> -	<del></del> _
					<del></del>
			<del></del>		
•		•			
				<del></del>	
				··· ·-	
					<del></del>
**		<u> </u>			
				<del>,</del> -	<del></del>
<del></del>			<del></del>		<del></del>
n effective date is listed ote: If the date inser		ific and cannot be price in a policy of the second second in the second second in the second	icable statutory filin		nal) iling.) Pursuant to 605.020 date will not be listed as
ecord specifies a dela is filed.	ayed effective date, b	out not an effective	time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
September 19	<del></del>	2022			
		1 0			
[W	M. G.M. G. Signatur	g of a member or aut	LLC thorized representative	of a member	

Filing Fee: \$25.00