L04000065889

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COVER LETTER

TO: Registration So Division of Con			•
	ORKING FOR YOU, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Scott Curry		
		Name of Person	
	WOODWORKING FOR	YOU, LLC	
	<u> </u>	Firm/Company	
	5475 SW 56TH ST		
		Address	
	Ocala Fl., 34474		
	<u> </u>	City/State and Zip Code	
	WW4USCOTT@GMAIL.C		
For further information of	e-mail address: (concerning this matter, please c	to be used for future annual report no all:	ittication)
Scott Curry	,	941 286-8511	
Name o	of Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 633 Tallahassee,		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

24 Jay 22 Mill: 54

WOODWORKING FOR YOU, 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 Florida document number $\frac{104000065889}{10000065889}$.	were filed on Sep 03, 2004	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
W4U Working For You, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5475 SW 56TH ST	
(Principal office address MUST BE A STREET ADDRESS)	rincipal offices address, it applicable:	
	Florida 34474	
Enter new mailing address, if applicable:	5475 SW 56TH ST	
(Mailing address MAY BE A POST OFFICE BOX)	Ocala	
	Florida 34474	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		me of the new registered
	Enter Florida street address	
		Zıp Code
	V HV	гар с оас

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 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>	Name	Address	Type of Action
MGR	Deborah S Moser	5475 SW56TH ST	= Add
		Ocala	□Remove
		Florida 34474	_
		_	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
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			IChange
			
			□Remove
			□Change

					
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ote: If the date in	isted, the date must be spaced in this block does date on the Departs	oes not meet the ap	plicable statutory fi	r more than 90 days after ling requirements, thi	onal) filing.) Pursuant to 605.02 s date will not be listed
ecord specifies a is filed.	delayed effective date	, but not an effecti	ve time, at 12:01 a.i	m, on the earlier of: (b) The 90th day after th
		2024			
ited		 -			
o1/16	Scare 7	7 Cross		ive of a member	