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DATE: 09/02/22

NAME: SEW WORTH IT, LLC

TYPE OF FILING: AMENDMENT

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COVER LETTER

	TH IT, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	TROY H. MYERS, JR., E	SQ.	
	Name of Limited Liability Company losed Articles of Amendment and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following: TROY H. MYERS, JR., ESQ. Name of Person TROY MYERS LAW FIRM, PLLC Firm/Company 2033 MAIN ST. STE. 204 Address SARASOTA, FL 34237 City/State and Zip Code myerslegalsvcs@gmail.com E-mail address: (to be used for future annual report notification) her information concerning this matter, please call: Myers, Jr. Name of Person Area Code Daytime Telephone Number di is a check for the following amount: .00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Mailling Address: Registration Section Division of Corporations		
	TROY MYERS LAW FIR	RM, PLLC	
		Firm/Company	
	2033 MAIN ST. STE. 204		
		Address	
	SARASOTA, FL 34237		
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			(fication)
For further information c	Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filling. see return all correspondence concerning this matter to the following: TROY H. MYERS, JR., ESQ. Name of Person TROY MYERS LAW FIRM, PLLC Firm/Company 2033 MAIN ST. STE. 204 Address SARASOTA, FL 34237 City/State and Zip Code myerslegalsvcs@gmail.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: y H. Myers, Jr. Name of Person Area Code Daytime Telephone Number 10sed is a check for the following amount: \$25.00 Filling Fee Certificate of Status Certified Copy (additional copy is enclosed) Mailling Address: Registration Section Registration Section		
Troy H. Myers, Jr.		941 586-9093	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			ction
		=	
P.O. Box 632	7	The Centre of T	Callahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FII	ED	
2022 SEP - 2 SECRETARY		
SECRETARY	AM 9: 3	1
scorde VIII		

SEW WORTH IT, LLC

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

(A Flottua L	mined Elability Company)	,		
The Articles of Organization for this Limited Liability Co. Florida document number L06000089580	mpany were filed on 09/12/2006	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company here:			
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	7482 ALBERT TILLINGH	AST DR.		
Principal office address MUST BE A STREET ADDRE	SARASOTA, FL 34240	SARASOTA, FL 34240		
Enter new mailing address, if applicable:	7482 ALBERT TILLINGH	AST DR.		
Mailing address MAY BE A POST OFFICE BOX)	SARASOTA, FL 34240			
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	office address on our records, en	ter the name of the new regis		
2022 M	AIN ST. STE. 204			
New Registered Office Address: 2033 M	Enter Florida street add	dress		
SARAS	OTA	Florida 34237		
	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 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	Aaron E. Greenberg	5507 PALMER CROSSING CIRCLE	□ Add
		SARASOTA, FL 34233	■Remove
			Change
			□Add
			□Remove
			Change
	·		
			□ Remove
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ective date, if other than the d	ate of filings		(antional)	
effective date is listed, the date must b	e specific and cannot be prior to	date of filing or more that	(optional) n 90 days after filing.) Pursuant t	605,0207
te: If the date inserted in this bloc nument's effective date on the Dep		ole statutory filing requ	irements, this date will not b	e listed as
zer	armont of blace 3 records.			
cord specifies a delayed effective of	late but not an effective tim	e at 12:01 a.m. on the	earlier of: (b) The 90th day	after the
s filed.	ate, out not an effective thin	o, at 12.01 and on the	carner or. (b) The 70m all	
ed	2022			
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It Wegen	gnature of a member or authori			_
/ / 51	gnature of a member or authori	ized representative of a m	енносг	
TROY H. MYERS, JR.				
	Typed or printed	name of signee		_