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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SMALL BUSINESS RESOURCES USA, INC.

Account Number : I200408000173 Phone : (407)298-4646 Fax Number : (407)297-0588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CREATING WEALTH USA, LLC

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Corporate Filing Menu

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K. SALY

NOV - 6 2023

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

To:

COVER LETTER FOX BUT # # 23000 384669 3

	ealth USA, 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:	
	James K. Duerr, CPA		
		Name of Person	
	SBR USA, LLC		
		Firm/Company	
	5401 S. Kirkman Rd., Ste.	310	
	 	Address	
		City/State and Zip Code	
	Orlando, Fl 32819		
	E-mail address: (to be used for future annual report not	iffication)
For further information of	oncerning this matter, please c	all:	
James K. Duerr, CPA		407 298-4646	5
Name o	f Person		ne Telephone Number
Enclosed is a check for the	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)
Mailing Address Registration		Street Address: Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee

FAX AUT # H 23000 384669 3

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

From: James Duerr - Fax: 14072984646

TO ARTICLES OF AMENDMENT 'C TO ARTICLES OF ORGANIZATION OF

FILEL

2023 HOV -6 PM 8: 08

Creating Wealth USA, LLC

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

(A F10)	nda Limited Liability Company)	=14107
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on 01/19/2007	and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "L	Limited Liability Company," the designation "LLC	O" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new malling address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	55
	, Fl	orida
	·	Zip Code
New Registered Agent's Signature, If changing Registe	red Agent:	
I hereby accept the appointment as registered age	nt and agree to act in this capacity. I fu	rther agree to comply with th

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 Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	August Byllott	122 East Lake Avenue	□Add
		Longwood, FL 32750	□Remove
			■Change
MGR	Audrey Byllott	122 East Lake Avenue	□Add
		Longwood, FL 32750	□Remove
			■ Change
AMBR	Homeowner Resource, LLC	122 East Lake Avenue	
		Longwood, FL 32750	□Remove
			☐ Change
			□Add
			ALL ALL AND COChange
			The David
			Remove
		Change	
			□Add
			□Remove
			Change

To: Fax (850) 617-6383 Page: 6 of 6 11/08/2023 10:13 AM

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		Immediately			
effective date is listed, te: If the date inserte	than the date of filing: the date must be specific and of d in this block does not me e on the Department of Sta	armot be prior to date et the applicable s	of fling or more than Statutory filing require	(optional) 10 days after filing.) Pur ements, this date will	suant to 605.020 not be listed a
्। cord specifies a delay	ed effective date, but not a	m effective time, a	t 12:01 a.m. on the ⇔	urlier of: (b) The 90	th day after the
s filed.					
September 8	_ /	2023			
.	<u>₩</u> ,	*			
·	Signature of a m	ember or authorized	representative of a mer	nber	
•	3.0		•		

FAX AUDIT # H 23000 384 669 3

Filing Fee: \$25.00