LOS 000015254

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COVER LETTER

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Registration Section

TO:

Division of C	orporations		
Young & SUBJECT:	Haas, CPA's, LLC		
SUBJECT:	Name of Li	mited Liability Company	<u> </u>
	of Amendment and fee(s) are su condence concerning this matte	-	
rease return an enres	gondence concerning this matte	r to the following:	
	Norbert N. Young, CPA		
		Name of Person	
	Young & Haas, CPAs, Ll	L.C	
		Firm/Company	
	401 W. Colonial Drive, S	uite 801	
		Address	
	Orlando, FL 32804		021 D
		City/State and Zip Code	# FE 2021 DEC 17 SEORE SEO SEORES SEO
	nnyoungcpa@yahoo.com		DIT PA
	E-mail address:	(to be used for future annual report notification)	
For further information	concerning this matter, please o	eall:	PH 12: 27
Norbert N. Young		407 422-1530 at ()	77. 27
Name o	of Person	Area Code Daytime Telephone N	lumber
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certadditional copy is enclosed) Certadditional copy is enclosed)	1.00 Filing Fee. rtificate of Status & rtified Copy ditional copy is enclosed)
<u>Mailing Addres</u> Registration S		Street Address:	
Division of C		Registration Section	
P.O. Box 632	!7	Division of Corporations The Centre of Tallahassee	
Tallahassee, I		2415 N. Monroe Street, Su	des 910

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

Young & Haas, CPA's, LLC

(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number 1.08000015254	Company were filed on 02/11/2008	and assigned 2
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	mited liability company here:	
Norbert N. Young, CPA, LLC		
The new name must be distinguishable and contain the words "I.	imited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	·	
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing 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: Name of New Registered Agent:	ed office address on our records, <u>enter the n</u> :	ame of the new registered
New Registered Office Address:	Enter Florida street address	
	Cin	Zip Code
low Registered Agent's Clauster to 1		- M. C. M.C.

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. Thereby confirm that the limited liability company has been notified in writing of this change.

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

Title	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
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			□Change
			🗆 Add
			□Remove
			□Change

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to the name	of the LLC.	-					-	
								
								
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cord specifies a filed,	elayed effective o	late, but not :	ın effective	time, at 12:0	1 a.m. on the	cartier of: (b	The 90th c	lay after the
December 1-			2021					
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