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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Divi	sion of Corpo	rations			
cup iccr.	Emerging :	People, LLC.	,	•	
SUBJECT:			ited Liability Company	.	
The enclosed	Articles of An	nendment and fee(s) are sub	mitted for filing.		
Please return	all correspond	ence concerning this matter	to the following:		
		Tiffany Thomas			
			Name of Person		
			Firm/Company		
		4015 Snipe Lane			
			Address		
		Land O Lakes, Fl 34639			
		Tthomas@emergingpeople	City/State and Zip Code .org		
		E-mail address: (to be used for future annual	report notification)	
For further in	formation con	cerning this matter, please ca	all:		
Tiffany Thor	mas		813 60	00-0822	
	Name of P	erson	at () Area Code	Daytime Telepho	one Number
Enclosed is a	check for the	following amount:			
■ \$25.00 Fi	1	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee of Certified Copy (additional copy is end		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	ling Address: distration Sec dision of Cor			ddress: ation Section n of Corporatio	ns

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

Emerging People, LLC.

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(A Florida Limited	Liability Company)	our records.	
The Articles of Organization for this Limited Liability Company Florida document number	wwere filed on	(2010	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the design	nation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office	P.O. Box 292307 Temple Terrace, Fl		of the new registere
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida s	treet address	
		Florida	<u></u>
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		

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.

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

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 = A	Authorized Member	· · ·	
Title	<u>Name</u>	Address 21 SEP 10 FH 3: 19	Type of Action
AMBR	Tiffany J. Thomas	4015 Snipe Lane	□Add
		Land O Lakes, Fl 34639	
			□Remove
			Change
MGR	Mariah D. Thomas	4015 Snipe Lane	(c ■Add
		Land O Lakes, FI 34639	
			□Remove
	Date District	1015.0	□ Change
MGR	Bobby Richards	4015 Snipe Lane	□Add
		Land O Lakes, FL 34639	Remove
			M.T.
			- The state of the
			□Add
		-	□Remove
			□Change
			□Add
			□Remove
		-	□Change
			Remove
			□Change

			(Attach additional sheet Attach additional sheet 21 SET 10	рн 3: 19
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A Clarkin	ig -1'4/g	ĉ f	Tittan	1 thomas
			Solber	
* Adding			MARSANI.	Thomas
* Renone			Robbil	8 y Caros
-				
ective date, if other the effective date is listed, the error of the date inserted in the ument's effective date o	date must be specific an this block does not:	id cannot be prior to meet the applicab	date of filing or more than 90	(optional) days after filing.) Pursuant to 605.0 ments, this date will not be listed
ord specifies a delayed filed.	effective date, but no	it an effective tim	e, at 12:01 a.m. on the eart	lier of: (b) The 90th day after t
		2021		
June 21. ed			_	

Typed or printed name of signee