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	and a Name of	
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Breakaway FINGNCIAL Group, LLC. Name of Dimited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher A. Grzancuski Name of Person
Breakaway Financial Group LLC. Firm/Company
10455 Green Links Dr. Address
Tampa FL 33626  City/State and Zip Code  arzanowskie amail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher A. Grzynowski at (813) 370-6961  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee.  Certificate of Status Certified Copy Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brenkaway	Finance	ial Group	LLC.		
(Name of the Limite	d Liability Comp A Florida Limited	pany as it now appear I Liability Company)	s on our records.)		_
The Articles of Organization for this Limited Lia Florida document number <u>L13 000151</u>		y were filed on	10/28/20	13 and	d assigned
This amendment is submitted to amend the follo	wing:				
A. If amending name, <u>enter the new name of</u>					
The new name must be distinguishable and contain the wo	ords "Limited Liab	bility Company," the de	esignation "LLC" o	or the abbreviatio	n "L.L.C."
Enter new principal offices address, if applica	able:	N/A			
(Principal office address MUST BE A STREE)	<u>r ADDRESS)</u>			<u>~~~~</u>	~
Enter new mailing address, if applicable:		NA		TALLAHAS:	2019 AUG -
(Mailing address MAY BE A POST OFFICE I	<u>80X)</u>				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
				1117	X III
B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered fice address he	office address on ere:	our records,	L= V	ა
Name of New Registered Agent:	NIA	<del></del>			
New Registered Office Address:					
		Enter Flor	ida street address		<del></del>
			Flori		
		City		Zip C	ode
New Registered Agent's Signature, if changing Real hereby accept the appointment as registered provisions of all statutes relative to the properaccept the obligations of my position as regisheing filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing the company has been notified in the company has been notified in the company has been notified in the company has been n	d agent and ager and complet stered agent as registered offic	PIA gree to act in this c te performance of s provided for in C	my duties, and Thapter 605, F.,	I am familian S. Or, if this c	r with and document is

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Marye N. G:Zanowski	10455 Green Links Dr	□ Add
		Tampa FL 33626	Remove
			Change
		□ Remove	
			Change
			□ Remove
		Change	
			D Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			□ Remove
			Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Mote:	ive date, if other than the date of filing:
f the red b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	July 30th 2019
	Signature of a member or authorized representative of a member
	Christopher A. Grzgnowski. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00