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> 2024 JUL -9 PM 1: 12 SECRITARY OF STATE

## **COVER LETTER**

TO: Registration S  Division of Co		F	•	
SUBJECT: 511	U AMIAM ENTLYP Name of Lin	NSU LU (47 -	1375266)	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	pondence concerning this matter	to the following:		
	AAVIN MCKIN	Name of Person	<del></del>	
	steps ahead	ENTUPNIUS, CIC		
	3371 Thames	PACA. Address		
	Haphzibah, G	A 30815 City/State and Zip Code		
	MATAN MCKINNON E-mail address: (	1840 VANUL CUM to be used for future annual report noti	fication)	
For further information	concerning this matter, please c	all:		
AAYIY MCY	of Person	at (10) LOCA Arca Code Daytim	(1832 e Telephone Number	
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	CE \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Second Division of Cor The Centre of Telegraphic Properties of Tele	porations fallahassee e Street, Suite 810	<b>₽</b>

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Steps Ahead Enterphies, uc

(Name of the Lim	(A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I	Liability Company	were filed on	and assigned
Florida document number	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		3370 Thames Place	
(Principal office address MUST BE A STRE	ET ADDRESS)	Hopnziban, OA 30810	5
Enter new mailing address, if applicable:		_ 1091 WYNNDAUR	iane
(Mailing address MAY BE A POST OFFICE BOX)		JUNESDIMO, GA 3/123	8
B. If amending the registered agent and/or agent and/or the new registered office addressed agent and/or the new Registered Agent:	ss here:	ACKINNIN	ie of the new registere
New Registered Office Address:	5300 W	MINITALIN STYPH H-13	lo
	H0[	JUANA Florida	33E) ZieCode
New Registered Agent's Signature, if changing			P 10
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as registery being filed to merely reflect a change in the company has been notified in writing of this	er and complete istered agent as p registered office	performance of my duties, and I am provided for in Chapter 605, F.S. OF,	familian with and if this document is
	If Chan	ging Heersteren Agent Signature of New Re	gistered 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
MGR	Aaron Mckinnon	3370 Thames Place	🗆 Add
		Haphzilan, GA 30815	□Remove
			@Change
AMBR	steven capally	3370 Thames Place	EAdd
	V	3370 Thamus Place Haphzibah, GA 30815	□Remove
			□Change
		-	🗆 Add
			□ Remove
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ffective date, if other than the an effective date is listed, the date mulote: If the date inserted in this bocument's effective date on the E	st be specific and lock does not me	cannot be prior to a	date of filling or more e statutory filling n	(option than 90 days after fi equirements, this c	ling.) Purs	suant to 605.0 not be listed	020 d a:
record specifies a delayed effecti is filed.	ve date, but not a	in effective time	, at 12:01 a.m. on	the earlier of: (b)	.The 90t	th day after	the
ated July 2nd	Ma'.	2024			ELAHAY	)024 JUL -9	
()		//			SS	(2	
J			7		SE POF	<u></u>	-
<del></del>	Special contraction	ember or authoriz	ed representative of	a member	EE, FL	PH 1: 12	