

# L15000092909

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

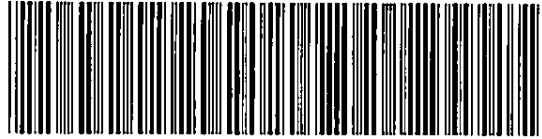
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CT CORP**  
**(850) 656- 4724**  
**3558 lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 10/17/2023  
Acc#120160000072

*en: c Sll*

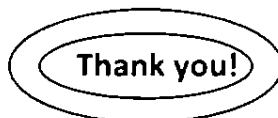
Name:	HOLISTIC HUMANITY, LLC
Document #:	
Order #:	15175696 - 1

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
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Amount: \$ **25.00**



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

TALLAHASSEE, FLORIDA

Florida document number L15000092909

HOLISTIC HUMANITY, LLC

**(Principal office address MUST BE A STREET ADDRESS)**

**(Mailing address MAY BE A POST OFFICE BOX)**

**New Registered Office Address:**

Enter Florida street address

Florida

Cin-

Zip Code

*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**

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>	<u>Address</u>	<u>Type of Action</u>
Owner	Apyrl D Perez	242 S. Washington Blvd	<input type="checkbox"/> Add
		#277	<input checked="" type="checkbox"/> Remove
		Sarasota, FL 34236	<input type="checkbox"/> Change
MGR	Apyrl D Perez	242 S. Washington Blvd	<input checked="" type="checkbox"/> Add
		#277	<input type="checkbox"/> Remove
		Sarasota, FL 34236	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SANDHURST STATE  
TALLAHASSEE, FLORIDA

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2023 OCT 17 AM 9:45  
SECOND JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated October 16 2023

- DocuSigned by:

April D. Perez

Signature of a member or authorized representative of a member

Apryl D Perez, Sole Member

Typed or printed name of signee