L15 000 155 981

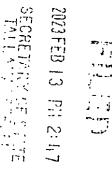
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900401916799

02/18/23--01015--017 **25.00



COVER LETTER.

TO: Registration S Division of Co				•	
	Within, LLC	•,		•	
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Hillarie Marcano				
		Name of Person			
	Maximize Within, LLC				
		Firm/Company		_	
	12277 SW 55 Street, Suite	908			
		Address		_	
	Cooper City, FL 33330			202 SE	
		City/State and Zip Code		2023 FEB SECRETA	ς-
	cbranker@gmail.com				
For further information	t-mail address: (concerning this matter, please c	(to be used for future annual report notified):	ication)	13 E	
Hillarie Marcano		754 206-2934		2:17	•
Name	of Person	at () Area Code Daytime	: Telephone Numbe	<u>" </u>	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &	
Mailing Addre		Street Address: Registration Sec	tion		
Registration Section Division of Corporations		Registration Sec Division of Corp			
P.O. Box 632	27	The Centre of T	allahassee	210	
Tallahassee,	rに 32314	2415 N. Monroe	: Street, Suite 8	51U	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maximize Within, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on September 14, 2015 and assigned Florida document number $\frac{L15000155981}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New 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, I hereby confirm that the limited liability company has been notified in writing of this change.

City

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
MGR	Carlton Branker	2114 N. Flamingo Road	≣ Add
		Suite 202	□Remove
		Pembroke Pines, FL 33028	□Change
MGR	Hillarie Marcano	12277 SW 55 Street	□Add
		Suite 908	■Remove
		Cooper City, FL 33330	□Change
			SECRETATION OF STATE
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			[]Change
			□Add
			□Remove
			☐ Change
			□Remove
			□Change

	- .		, <u> </u>		 _
			 	<u>.</u> .	
	<u>-</u>	_			
					
					<u> </u>
				. <u>-</u>	
				SECR TAIL	023
				<u></u>	
	· · ·		<u> </u>	<u>- 조절</u> 성본	
		••		.3 ? 3(3 4 0	-5 :1
				[* cc.	رية
				177	7
		* u.+.			
				<u> </u>	
	1 . 651:			(antional)	
tive date, if other than the frective date is listed, the date mus	a be specific and can	not be prior to date of	filing or more than 90 d	_ (optional) lays after filing.) Pur	suant to 605,0207
If the date inserted in this bl ment's effective date on the D	ock does not meet epartment of State	the applicable statuls records.	tory filing requireme	ents, this date will	not be fisico as
ord specifies a delayed effectiv filed.	e date, but not an e	effective time, at 12	:01 a.m. on the earli	er of: (b) The 90	th day after the
, February 7	2	023			,
d	· _	·			
1VA	_			wit	

Filing Fee: \$25.00