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





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FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Meadowlawn	Holdings, LLC	1		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	d Liability Company)	i our records.)		
The Articles of Organization for this Limited Liability Compar	ny were filed onJ	anuary 24, 2024	and assign	ned
Florida document number <u>L15000177552</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	ability company here:			
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the desig	nation "LLC" or the ab	breviation "L.1C	• • • • • • • • • • • • • • • • • • • •
Enter new principal offices address, if applicable:	810 29th Ave N		~~~~~	
(Principal office address MUST BE A STREET ADDRESS)	St Petersburg,	FL 33704	2024	
		·		<u> </u>
Enter new mailing address, if applicable:	810 29th Ave N	: : : :	25 PH	
(Mailing address MAY BE A POST OFFICE BOX)	St Petersburg,	FL 33704	10 <u>-</u>	\Box
		<u>,</u>	<u>∵</u> 5	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our reco	rds, <u>enter</u> the nam	e of the new r	egisterec
Name of New Registered Agent:		<u>.</u>		
New Registered Office Address:	810 29t			
	Enter Florida	street address		
	St Petersburg	, Florida	33704	
	City		Zip Code	

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.

If Changing Registered Agent, Signature of New Registered Agent

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:Meadov	vlawn Holdings, LLC			
SUBJECT:		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
		Linda Mitchell Allen		
		Name of Person		
		Meadowlawn Holdings, LLC		
		Firm/Company		
		810 29th Ave N		
		Address		
		St Petersburg, FL 33704		
	*	City/State and Zip Code		
		TampaDWA@aol.com		
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
David Wayne A	llen	at (727) 480-257	1	
Name o	f Person		ne Telephone Number	
Tanda and Tanasanale for the	or following amount			
Enclosed is a check for the	_		••	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Xi S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres	i <u>s:</u>	Street Address:		
Registration Section		Registration Se		
Division of Corporations		Division of Co		
P.O. Box 632		The Centre of		
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

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
AMBR	David Wayne Allen	810_29th Ave N, St Petersburg, FL 33704	X lAdd
			□Remove
			□Change
			🗆 Add
			□Remove
			Change
		·	🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change
			□Adđ
			□Remove
			ПС

-	Purpose of this amendment is to add David Wayne Allen as an additional Member, change of
_	addresses and add our EIN#.
	EIN# 47-5356804
-	
-	
•	
-	
-	
-	
-	
_	
-	
ote:	ive date, if other than the date of filing: [cetive 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
recor d is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
	<u>le/21/7024</u> .
Dated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00