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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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2021 NOV 29 AM 7: 35 SECRETARY OF STATE

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DEC 1 4 2021

COVER LETTER

TO:

Registration Section

Division of Cor	porations		•
Senger Invo	estments, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Rory B. Weiner		
		Name of Person	
	Rory B. Weiner, P.A.	bmitted for filling. r to the following: Name of Person Firm/Company Address City/State and Zip Code (to be used for future annual report notification)	
			e of Person a/Company Address e and Zip Code or future annual report notification) 813 681-3300 Area Code Daytime Telephone Number 00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations The Centre of Tallahassee
	635 W. Lumsden Road	Name of Limited Liability Company and fee(s) are submitted for filing. erning this matter to the following: Weiner Name of Person Weiner, P.A. Firm/Company Lumsden Road Address Florida 33511 City/State and Zip Code proryweiner.com E-mail address: (to be used for future annual report notification) is matter, please call: at (\frac{813}{\text{Area Code}}) \frac{681-3300}{\text{Daytime Telephone Number}} amount: 0 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
		Address	
	Brandon, Florida 33511		
	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Rory B. Weiner Name of Person Rory B. Weiner, P.A. Firm/Company 635 W. Lumsden Road Address Brandon, Florida 33511 City/State and Zip Code rweiner@roryweiner.com E-mail address: (to be used for future annual report notification) oncerning this matter, please call: Area Code Terson Area Code Daytime Telephone Number at (
		to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
Rory B. Weiner			
Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
		ı	
Mailing Addres Registration S Division of C P.O. Box 632	Section orporations	Registration S Division of Co	orporations
Tallahassee, I			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO FILED ARTICLES OF ORGANIZATION 2021 NOV 29 AM 7: 36 **OF**

Senger Investments, LLC

ents, LLC

SECRETARY OF STATE

(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	12/29/2015	and assigned
Florida document number L15000213783			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	<u>lity company</u>	<u>here</u> :	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," t	ne 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 a agent and/or the new registered office address here: Name of New Registered Agent:			ter the name of the new registered
	····		
New Registered Office Address:	Enter	Florida street aa	dress
			. Florida
	City		Florida
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance provided for i	of my duties n Chapter 60	, and I am familiar with and 95, F.S. Or, if this document is
1f Chan	ging Registered	Agent, Signati	re 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>	Type of Action
AMBR	Jonathan G. Senger	398 LAUREL LN.	
		PALM HARBOR, FL 34683	■Remove
			□ Change
AMBR	Regina G. Senger	398 LAUREL LN.	≣ Add
		PALM HARBOR, FL 34683	□Remove
			🗀 Change
		_ ·	
			□ Remove
			□ Change
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			□Remove
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			□Remove
			□Change

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Filing Fee: \$25.00