LIWOCCO 3732C

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

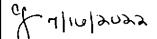
Office Use Only



700387607767

05/16/22--01048--015 **120.00





COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	Leachim, L	LC		
SUDJE	cı	Name of Limi	ted Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Elaine B Moore		
			Name of Person	······································
			Firm/Company	
		5219 S Steven Dr		
			Address	· · · · · · · · · · · · · · · · · · ·
		Homosassa, FL 34448		
		forevermoore9@gmail.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report noti	fication)
For furth	ner information co	oncerning this matter, please ca	ili:	
Elaine E	3 Moore		352 212-3131 at ()	
	Name of	f Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for th	ne following amount:	,	
18 \$25	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	<u>s:</u>	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Leachim, LLC

2022 HAY 16 AH 11:00

(Name of the Lin	(A Florida Limited Liability Company)	ars on our records.)			
The Articles of Organization for this Limited	Liability Company were filed on $\frac{2}{2}$	-16-2016 and assigned			
Florida document number L1600037320	·				
This amendment is submitted to amend the fo	ollowing:				
A. If amending name, enter the new name	of the limited liability company h	<u>nere</u> :			
n/a					
The new name must be distinguishable and contain the	e words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if app	licable:				
Principal office address MUST BE A STRE	EET ADDRESS)				
Enter new mailing address, if applicable:					
Mailing address MAY BE A POST OFFIC.	<u>E BOX)</u>				
3. If amending the registered agent and/or gent and/or the new registered office add		records, enter the name of the new registered			
Name of New Registered Agent:	Cedar Park, LLC				
New Registered Office Address:	5219 S Steven Dr				
New Registered Office Address: Enter Florida street address					
	Homosassa	, Florida ³⁴⁴⁴⁸			
	City	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 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	Michael D Moore	9820 W Yulee Dr. Homosassa, FL 34448	□ Add
			■Remove
MGR	Elaine B Moore	9820 W Yulce Dr, Homosassa, FL 34448	□Add
			■Remove
			□Change
MGR	Cedar Park, LLC	5219 S Steven Dr, Homosassa, FL 34448	= Add
			□ Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
		-	🗆 Add
			□ Remove
			□Change

······································				
		<u> </u>	·	
				 _
	· · · · · · · · · · · · · · · · · · ·			
· · · · · · · · · · · · · · · · · · ·				
				
				<u> </u>

	· · · · · · · · · · · · · · · · · · ·			_
				
				
	04/22/2022			
Effective date, if other than to fan effective date is listed, the date n	he date of filing:	to date of filing or more than	(optional)	- 605 0207
Note: If the date inserted in this	block does not meet the applica	able statutory filing requi	rements, this date will not be	listed as
locument's effective date on the	Department of State's records.			
		me at 12-01 a.m. on the o	earlier of: (h) The 90th day	
record specifies a delayed effec	tive date, but not an effective ti	ino, at 12.01 a.m. on the	carner or. (b) The John day	arter the
record specifies a delayed effec d is filed.	tive date, but not an effective ti	me, at 12.01 a.m. on the t	connection (by The Folk day	arter the
d is filed.	tive date, but not an effective ti	me, at 12.01 a.m. on the t	anner on (b) The John day	after the
d is filed.			anner on (b) The John day	aner the
d is filed.	, 2022 ,,			
d is filed.				