## L17000 086 312

(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:				





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## **COVER LETTER**

TO:

TO:	Registration Se Division of Cor	ction porations		•		
		NKLEBARGER, LLC				
SUBJI	ECT:	CT:Name of Limited Liability Company				
The en	iclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	19 000		
Please	return all correspo	ndence concerning this matter to	the following:	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
		CAFTLIN ELLENSON				
			Name of Person			
		CAITLIN ELLENSON, LL	C.			
			Firm/Company			
		520 SW 12TH COURT				
			Address			
	FORT LAUDERDALE, FLORIDA 33315					
		CINKLEBARGER@GMAI	City/State and Zip Code L.COM			
			o be used for future annual report no	otification)		
For fu	irther information	concerning this matter, please ca	ill:			
	TLIN ELLENSON		954 647-7296			
<del></del>	Name	of Person	at () Area Code Dayt	ime Telephone Number		
Enclo	osed is a check for	the following amount:				
<b>≡</b> \$	25.00 Filing Fee	□ \$30.00 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)		
	P.O. Box 63	Section Corporations 27		Section		
	Tallahassee.	.FL 32314	24 IJ IN, IVIOI	not prect bare or		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAITLIN INKLEBARGER, 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 I	hability Company were filed on	and assign a		
Florida document number L17000086312	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company her	<u>·e</u> :		
CAITLIN ELLENSON, LLC				
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STREA	ET ADDRESS)			
		•··		
Enter new mailing address, if applicable:	<del></del>			
(Mailing address MAY BE A POST OFFICE	<u></u>			
B. If amending the registered agent and/or agent and/or the new registered office addre	St.	cords, <u>enter the name of the new registered</u>		
Name of New Registered Agent:	CAITLIN ELLENSON			
New Registered Office Address:	520 SW 12TH COURT			
	Enter Florida street address			
	FORT LAUDERDALE	Florida		
	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. Thereby 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>	Type of Action
MGR	CAITLIN INKLEBARGER	520 SW 12TH COURT	
	<del></del>	FORT LAUDERDALE, FLORIDA 33315	□Add
			Remove
			□Change
MGR	CAITLIN ELLENSON	520 SW 12TH COURT	-
		FORT LAUDERDALE, FLORIDA 33315	<b>≣</b> Add
			□Remove
			⊡Change
			-
		· · · · · · · · · · · · · · · · · · ·	□Add
			Remove
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			□Add
			□Remove
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			□Add
			□Remove
			□ Change

## Page 2 of 3

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amending any other information					
			-		
Effective date, if other than the defeative date is listed, the date must Note: If the date inserted in this blocklocument's effective date on the Department.	ak aus mormoerme abbue.	athe than and	(op nore than 90 days af ng requirements, t	tional) der (iling.) Pursuant to 605 his date will not be list	5.020 ted a
ne record specifies a delayed The 90th day after the reco	effective date, but no rd is filed.	t an effective	time, at 12:01	i a.m. on the earli	ier
December 10	2019				
Dated		-· (			
	Carthi	<u>Ellin</u>	- E.J. (		
	Signature of a member or auth	orized representation	re of a memoci		

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Filing Fee: \$25.00