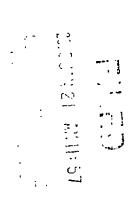
L17000094844

(Re	equestor's Name)	
	ldress)	
<i>(, .</i> , .,	,	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	≥ #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	,

Office Use Only



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CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 01/20/25 Order #: 1777974-1 Re: Inspiria, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$60.00 - FL State Account Number: I20000000195

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:

TO: Registration So Division of Cor			
Inspiria LL	.C		
SUBJECT:	Name of Lin	nited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Myrna Sevick		
		Name of Person	
	Inspiria LLC		
Firm/Company			
	4767 New Broad St.	Name of Person Firm/Company road St. Address 32814 City/State and Zip Code nspiria.com mail address: (to be used for future annual report notification) atter, please call: at (19	
	-	Address	
	Orlando, Fl. 32814		
		City/State and Zip Code	
	msevick@goinspiria.com	(a. b d. C C	
For further information c	concerning this matter, please c		reation) [8]
Myrna Sevick			
Name o	f Person		Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration !			otion
Division of C			
P.O. Box 632		The Centre of T	allahassee
Tallahassee,	rl 32314	2415 N. Monroc	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Inspiria LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	y were filed on April 28, 2017	and assigned
Florida document number L17000094844		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	pility company here:	
be new name must be distinguishable and contain the words "Limited Liab	ility 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)		
		5 : "()
		(A)
		1.1
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		(:)
 If amending the registered agent and/or registered office gent and/or the new registered office address here: 	address on our records, enter the	name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florie	ia
	City	zip со а е

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 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	Maria Thompson	4767 New Broad Street	□Add
		Orlando, FL 32814	≣ Remove
			□ Change
MGR	Myrna Sevick	4767 New Broad Street	= Add
		Orlando, FL 32814	□Remove
		·	□Add
			□Remove
		<u> </u>	□ Change
			\ \Add
			Remove
			□ Change
			□Add
			□Remove
			_Add
			□Remove
			Change

If amending any other informat	ion, enter change(s) her	e: (Attach additional	sheets, if necessary.)	
			<u> </u>	
	 .	·		
			<u> </u>	
				
<u> </u>				
				
				_
Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo	ock does not meet the applic	cable statutory filing req		
document's effective date on the Do	partment of State's records	i.		
he record specifies a delayed effective ord is filed.	date, but not an effective t	ime, at 12:01 a.m. on th	e earlier of: (b) The 90	Oth day after the
Dated January 17	2025	<u> </u>		
/S/ Myrna Sevio				
-	Signature of a member or auth	orized representative of a	member	
Myrna Sevick				
	Typed or print	ted name of signee		

CSC AMEND-26592