

L17000122760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

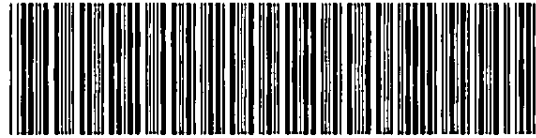
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

04/28/2021  
S.C.



600361520356

03/08/21--01023--005 \*\*50.00

FILED  
2021 MAR -8 P 11:39  
CLERK OF COURT  
SOUTH CAROLINA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Think it Thru, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laura Guillaume

\_\_\_\_\_  
Name of Person

Think it Thru, LLC

\_\_\_\_\_  
Firm/Company

11235 Saint Johns Industrial Pkwy, Suite 2

\_\_\_\_\_  
Address

Jacksonville, FL 32246

\_\_\_\_\_  
City/State and Zip Code

laura@thinkitthru.org

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura Guillaume

303 901-5665

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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)

**Mailing Address:**

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

**Street Address:**

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

2021 JUN -08 P 11:39

FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Think it Thru, 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 Liability Company were filed on 2/18/2021 and assigned  
Florida document number L17000122760.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

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, 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**

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>                                     | <u>Type of Action</u>                      |
|--------------|-----------------|--|--|
| MGR          | NOMOS, LLLP     | 1031 1ST ST S UNIT 602, Jacksonville Beach, FL 322 | <input type="checkbox"/> Add               |
|              |                 |  | <input checked="" type="checkbox"/> Remove |
|              |                 |  | <input type="checkbox"/> Change            |
| MGR          | Laura Guillaume | 1031 1ST ST S UNIT 602, Jacksonville Beach, FL 322 | <input checked="" type="checkbox"/> Add    |
|              |                 |  | <input type="checkbox"/> Remove            |
|              |                 |  | <input type="checkbox"/> Change            |
| MGR          | Steve Guillaume | 1031 1ST ST S UNIT 602, Jacksonville Beach, FL 322 | <input checked="" type="checkbox"/> Add    |
|              |                 |  | <input type="checkbox"/> Remove            |
|              |                 |  | <input type="checkbox"/> Change            |
|              |                 |  | <input type="checkbox"/> Add               |
|              |                 |  | <input type="checkbox"/> Remove            |
|              |                 |  | <input type="checkbox"/> Change            |
|              |                 |  | <input type="checkbox"/> Add               |
|              |                 |  | <input type="checkbox"/> Remove            |
|              |                 |  | <input type="checkbox"/> Change            |

2021  
MAR - 8  
P 11 39  
b39  
77  
11  
ED

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be used as the document's effective date on the Department of State's records.

Dated 2/19, 2021

Laura Guillame

The 90th day after the

**Filing Fee: \$25.00**