## L17000156223

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## **COVER LETTER**

TO:	Registration Se Division of Cor						
SUBJEC	Strategos H	ire LLC					
SOBJE	×1	Name of Lim	ited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	turn all correspo	ndence concerning this matter	to the following:				
		David Seguin					
			Name of Person				
Strategos Hire LLC							
		Firm/Company					
		1540 Myrtle Oaks Trail					
		Address					
		Oviedo, FL 32765					
		E-mail address: (	to be used for future annual report notifi	cation)			
For furth	er information c	oncerning this matter, please c	all:				
David S	eguin		321 303-3055 at ()				
Name of Person		f Person	Area Code Daytime	Telephone Number			
Enclosed	l is a check for th	ne 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)			
	Mailing Addres Registration S		Street Address: Registration Sec	tion			

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Strategos Hire LLC		
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs оп our records.)
he Articles of Organization for this Limited		21/2017 and assigned
lorida document number L17000156223		
his amendment is submitted to amend the fol	lowing:	
If amending name, enter the new name	of the limited liability company h	<u>ere</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company." the	lesignation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
		22
nter new mailing address, if applicable:		2.
Mailing address MAY BE A POST OFFICE	<u></u>	<u> </u>
. If amending the registered agent and/or gent and/or the new registered office addr	•	ecords, enter the name of the new regist
Name of New Registered Agent:	David Seguin	
New Registered Office Address:	1540 Myrtle Oaks Trail	
	Enter Flo	rida street address
	Oviedo	, Florida 32765
	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>	Address	Type of Action
CEO	Kelly Seguin	1540 Myrtle Oaks Trail Oviedo, FL 32765	□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
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			□Change
			□Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated May 16th 2023 Signature of a member or authorized representative of a member David Seguin Typed or printed name of signee

Filing Fee: \$25.00