L17000158451

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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T. MATTHEWS JUL 22 2022

COVER LETTER

TO: Registratio Division of	n Section Corporations		
	cial Reach LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sub	mitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	Scott Coc		
		Name of Person	
	Cox Investment Company	LLC	
		Firm/Company	
	122 E Main St #359		
		Address	
	Lakeland FLorida 33801		
		City/State and Zip Code	
	scox.business@gmail.com		
		to be used for future annual report noti	dication)
For further informati	on concerning this matter, please c	all:	
Scott Cox		863 602 4155	
Na	me of Person		ne Telephone Number
Enclosed is a check f	for the following amount:		
■ \$25.00 Filing Fe	e \$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 Ad		Street Address:	
	on Section of Corporations	Registration Se Division of Cor	
P.O. Box		The Centre of 1	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION CLUBE FARY OF STATE OF

22 MAY 23 AN IO: 05

The Social Reach 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 L Florida document number 1.17000158451		07/25/2017 and assigned
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name of	f the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if applie	cable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX1</u>	
B. If amending the registered agent and/or agent and/or the new registered office addresses		r records, enter the name of the new registered
Name of New Registered Agent	Registered Agents Inc	
New Registered Office Address:	7901 4th St N, Ste 300	
		Florida street address
	St. Petersburg City	Florida 33702 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
MGR	Cox Investment Company LLC	122 E Main St #359, Lakeland Fl 33801	= Add
			□Remove
			□Change
MGRM	Scott Cox	941 CORNELIA AVELAKELAND, FL 33815	□Add
			■Remove
			□Change
			□Add
			□Remove
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Effective date, if other t	han the date of filin	g:		(option	ial)
(If an effective date is listed, the Note: If the date inserted	date must be specific and in this block does not r	d cannot be prior to meet the applicab	date of filing or mor le statutory filing	e than 90 days after fi requirements, this o	ling.) Pursuant to 605.0207 late will not be listed as
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document's effective date					
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document's effective date the record specifies a delayed ord is filed.		, 2022 Twistue	e, at 12:01 a.m. or	i llic	The 90th day after the