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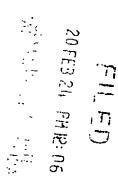
(Requestor's Name)
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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
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Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

Tallahassee, FL 32314

	Registration So Division of Co			
SUBJEC		24/7 Live LLC		
SUBJEC	-1i	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Steven Seeberg		
			Name of Person	
		Free Chat 24/7 Live LLC		
			Firm/Company	
		110 Via Capri		
			Address	
		Palm Beach Gardens, FL	33418	
		sberg33@gmail.com	City/State and Zip Code	
			to be used for future annual report no	tification)
For furth	er information o	concerning this matter, please c	all:	
Steven S	iceberg		980 722-9535 at ()	
	Name o	of Person		ne Telephone Number
Enclosed	is a check for the	he following amount:		
■ \$25.0	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		Street Address:	
Registration Section Division of Corporations P.O. Box 6327		Registration Se Division of Co		
		The Centre of		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Free Chat 24/7 Live LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our recordinated Liability Company)	b.)
ne Articles of Organization for this Limited Liability Cor	mpany were filed on 01/11/2018	and assigned
orida document number L18000010951		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limite	ed liability company here:	
ree Chat 24/7 Florida LLC		
e new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	-	20 F
rincipal office address MUST BE A STREET ADDRE	(225)	
		- 10 FE
		P 11
ter new mailing address, if applicable:		主意う
failing address MAY BE A POST OFFICE BOX)		30.0
		
If amending the registered agent and/or registered of	office address on our records, enter	the name of the new regis
ent and/or the new registered office address here:		
Name of New Registered Agent:	. <u></u> .	
New Registered Office Address:		
The wind prince Address.	Enter Florida street addres	zs
	121.	orida
	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>	Name	Address	Type of Action
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			_ 🗆 Remove
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tive date, if other than the date of filing: ffective date is listed, the date must be specific and cannot be prior to date of	filing or more than 90 days afte	i onal) r filing.) P	ursuant to	605.4
If the date inserted in this block does not meet the applicable statement's effective date on the Department of State's records.	utory filing requirements, thi	s date wi	ll not be	listo
series of sale of the beparation of sale s records.				
ord specifies a delayed effective date, but not an effective time, at 13	2:01 a.m. on the earlier of: (b) The 9	00th day :	after
filed.		,		
, February 13 2020 /				
1 2020				
Signifure of a member or authorized rep	resentative of a member			-

Filing Fee: \$25.00