L180000 63865

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COVER LETTER

TO:	Registration Se Division of Cor		•	
	The Middl	e Path, LLC		
SUBJ	ECT:			
		Name of Limi	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please	return all correspo	ndence concerning this matter (to the following:	
		Lyndsey Karns		
			Name of Person	
		The Middle Path, LLC		
			Firm/Company	
1		3850 NW 2nd Ave. Suite 2	22	
•			Address	
		Boca Raton, FL 33431		
			City/State and Zip Code	
		Dr.Lyndsey@middlepathco	•	
		E-mail address: (t	o be used for future annual report noti	fication)
For fu	rther information c	oncerning this matter, please ca	all:	
Lynd	lsey Karns		410 413-7868	
	Name o	f Person	at () Area Code — Davtim	ne Telephone Number
	. Auric C	. r crawn	, itea exact Daysiii	ic receptance reminer
Enclos	sed is a check for th	ne following amount:		
\$2	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 radditional copy is enclo

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION **OF**

The Middle Path, LLC

(<u>Name of the Limited Liability</u> (A Florida I	(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 Co Florida document numberL18000063865	ompany were filed on		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or the abbrevia		
Enter new principal offices address, if applicable:	3850 NW 2nd Ave, Suite 22		
(Principal office address MUST BE A STREET ADDRE	ESS) Boca Raton, FL 33431		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	# T		
B. If amending the registered agent and/or registered agent and/or the new registered office addressed agent and/or registered agent and/or registered agent and/or registered agent and/or registered agent and/or the new registered office addressed agent and/or the new registered office addressed agent and/or the new registered office addressed agent and/or the new registered agent			
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
New Registered Agent's Signature, if changing Registered			

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to c provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this c being filed to merely reflect a change in the registered office address. I hereby confirm that the limited lie company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered.

- <u>Title</u>	Name	Address	
MGR	Lyndsey Karns	3850 NW 2nd Ave, Suite 22	
		Boca Raton, FL 33431	
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or removed from our records:

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optional) safter filing.) Pursua s, this date will no
01 a.m. on the

Page 3 of 3

Filing Fee: \$25.00