1180000086216

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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H117121



February 23, 2021

ERICA ANDERSON 100 S ASHLEY DR STE 600 TAMPA, FL 33602

SUBJECT: ONE ANDERSON ENTERPRISE, LLC

Ref. Number: L18000086216

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 621A00004060

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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
	One Anders	son Enterprise, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	endence concerning this matter	to the following:	
		Erica Anderson		
			Name of Person	
		One Anderson Enterprise,	LLC	
			Firm/Company	
		100 S Ashley Dr Ste 600		
			Address	
		Tampa. FL 33602		
		in factor airea in more and it was	City/State and Zip Code	
		info@maintainmycredit.cor E-mail address: (n to be used for future annual report no	tification)
For further in	nformation c	oncerning this matter, please ca	all:	
Erica Ander	son		813 463-6135	
	Name o	f Person		me Telephone Number
Enclosed is a	a check for th	ne following amount:		
□ \$25.00 F	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)
Reg Div	iling Addres gistration S vision of C). Box 632	Section orporations	Street Address: Registration S Division of Co The Centre of	orporations
	lahassee, l			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRED

One Anderson Enterprise, LLC

2021 HAR 25 PH 5: 29

(A Elo	onty Company as a now appears on our records.
(7110	bility Company as it now appears on our records.) orida Limited Liability Company) SECRETARY OF STATE
The Assistance of Opponisation for this Limited Lightlit	y Company were filed on 04/05/2018 TALL THASSEE, FL and assigned
	y Company were med on and assigned
Florida document number L18000086216	·
This amendment is submitted to amend the following	;;
A. If amending name, enter the new name of the l	limited liability company here:
The new name must be distinguishable and contain the words "I	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 AD	DRESS)
Enter new mailing address, if applicable:	
• • •	
(Mailian adduses MAV DE A DOCT OFFICE DOV)	
Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registe	ered office address on our records, enter the name of the new regi
B. If amending the registered agent and/or registe	ered office address on our records, enter the name of the new regi
B. If amending the registered agent and/or registe	ered office address on our records, enter the name of the new regi
3. If amending the registered agent and/or registe	ered office address on our records, enter the name of the new regi
3. If amending the registered agent and/or registe gent and/or the new registered office address here Name of New Registered Agent:	ered office address on our records, enter the name of the new regi
3. If amending the registered agent and/or registe gent and/or the new registered office address her	ered office address on our records, <u>enter the name of the new reg</u> i e:
B. If amending the registered agent and/or registe agent and/or the new registered office address here and a Name of New Registered Agent:	ered office address on our records, enter the name of the new regi
Name of New Registered Agent:	ered office address on our records, <u>enter the name of the new reg</u> i e:

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 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
MGR	Erica Anderson	100 S Ashley Dr Ste 600 Tampa, FL 33602	= Add
			□Remove
			□Change
CEO	Erica Anderson		□Add
		4405 ASHBURN SQUARE DRIVE TAMPA, FL 33	61 ≣Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
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			□Remove
			□ Change

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f an effe Note: 1	e date, if other than the date of filing:
record d is file	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
Jated _	nuary 11 , 2021
	Signature of a member or authorized representative of a member