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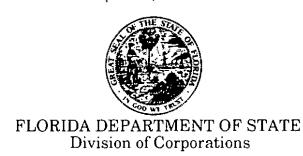
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D COMMELL





August 2, 2021

LIFE COACH 8, LLC 19046 BRUCE B DOWNS BLVD STE 1540 TAMPA, FL 33647

SUBJECT: LIFE COACH 8, LLC Ref. Number: L18000107894

We have received your document for LIFE COACH 8, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document is too light to read and it is not acceptable for imaging.

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.

Letter Number: 021A00018077

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

**Division of Corporations** 

**Registration Section** 

PO Box 6327

Tallahassee, Fl 32314

Attn: Yasmine

RE: Articles of Amendment/ Business Name change

February 11, 2022

As per our conversation, I have re-submitted my documents to change the business name, as the original paperwork sent and received by your office was deemed illegible. New copies are attached for your review.

Thank you for your cooperation in handling this matter.

Respectfully,

Max Garcia

## **COVER LETTER**

LIFE COACH 8 LLC SUBJECT: \_ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MAX GARCIA Name of Person MAX GARCIA MOTIVATIONAL SPEAKER, LLC Firm Company 19046 BRUCE B DOWNS BLVD SUITE 1540 Address TAMPA, FLORIDA 33647 City State and Zip Code AJ@KAIFINANCIAL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANDREA JONES Name of Person Enclosed is a check for the following amount: ☐ \$55,00 Filling Fee & ☐ \$25.00 Filing Fee S30,00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ATTN: VASMINE

Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 HAR-	TI -
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LIFE COACH 8, LLC		7 0
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	27
The Articles of Organization for this Limited Liability Company	were filed on04/30/2018	and assigned
Florida document numberE18000107894		<u></u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
MAX GARCIA MOTIVATIONAL SPEAKER, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	19046 BRUCE B DOWNS BOULE	VARD
(Principal office address MUST BE A STREET ADDRESS)	SUITE 1540	
	TAMPA, FLORIDA 33647	
Enter new mailing address, if applicable:	19046 BRUCE B DOWNS BOULE	THA MAD
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 1540	VARU
	TAMPA, FLORIDA 33647	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, enter the $m{n}$	ame of the new registere
Name of New Registered Agent:	- KIA	
New Registered Office Address:	Enter Florida street address	
	amy cumud situd ddifess	
	. Florida	
	Cin	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

Title	Name	Address	Type of Action
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	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ated	ULY 02 2021
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	Visiting of administrative of a member

Filing Fee: \$25.00