L18000235281	
(Requestor's Name) (Address) (Address)	300378019553
(City/State/Zip/Phone #)	01/05/2201010004 ቀ⊁60.00
Certified Copies Certificates of Status	
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T0: **Registration Section Division of Corporations**

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Group of Tallahalbee LhC Sname of Eimited Liability Company SUBJECT: The Anderson

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Tyle Andersm	Name of Person	
	215 S. Mor	True St Sute B Firm/Company	<u>'0</u>
	Eq llahus,	R 32301 Address	. <u></u>
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information e-	oncerning this matter, please c	all:	
		ai (50) 696-82	21/
Name o	f Person	Area Code Daytim	e Tèlephone Number
Enclosed is a check for th	te following amount:		
□ \$25.00 Filing Fee	S30.00 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 Address: **Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: **Registration Section Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF	
T ARTICLES OF O	-
The Anderson Group of The (Name of the Limited Lability Compa (A Florida Limited I	Ilchastic LLC nv as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\underline{L1800235281}$.	were filed on $\frac{0.1}{0.18}$ and assigned
Florida document number <u>L18000235281</u> .	,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
AnderSon Enterprises 1990 W A H	η <u>C</u>
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	215 S. Monroe Stret Scik 130 Tallatussa, P2 32301
(Principal office address MUST BE A STREET ADDRESS)	Tallahusse, PL 32301
	·
Enter new mailing address, if applicable:	215 S. Monroe St Suile 130 Tallahory F2 3230/
(Mailing address MAY BE A POST OFFICE BOX)	Tallahesta, 12 3230/
B. If amending the registered agent and/or registered office :	address on our records, <u>enter the name of the new registered</u>
agent and/or the new registered office address here:	

Name of New Registered Agent:		u
New Registered Office Address:		n 10
	Enter Florida street ad	Iress ~
		Florida
	City	Zip Code Cr
New Registered Agent's Signature, if changing Registered	d Agent:	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complete the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with the accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this focument 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, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
_ <u>P</u>	Tyles AnderSon	113 South montroe st	
		Filkhory FZ 32301	
			🗆 Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

EIN changed the new FI	N is as follows
EIN changed the new FI 87-4245533	
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E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after tiling.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _	Junuary 5	2022
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	JANK	
	- /	Signature of a member or authorized representative of a member
	Tylu	Ardess
		The second se

Typed or printed name of signee