

L18 000 290403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

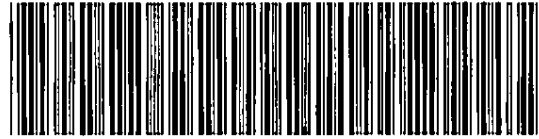
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100370580461

FILED

2021 AUG 20 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FL

100 20 292



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2021 AUG 19 AM 11:01

August 12, 2021

JACELYN BATISTA
7108 LAWNVIEW CT
TAMPA, FL 33615

SUBJECT: CHILDREN OF OUR FUTURE, LLC
Ref. Number: L18000290403

We have received your document for CHILDREN OF OUR FUTURE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Enclosed is the full complete form that has the registered agent signature statement.

The registered agent must sign accepting the designation.

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.

Catherine M Brumbley
Regulatory Specialist II

Letter Number: 421A00019168

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Children of Our Future, LLC

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:

Jacelyn Batista

Name of Person

Children of Our Future, LLC

Firm/Company

7108 Lawnview Ct

Address

Tampa, FL 33615

City/State and Zip Code

jmsheffler@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacelyn Batista

727

417-8923

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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
(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 AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Children of Our Future, LLC

(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 Company were filed on 12/18/2019 and assigned
Florida document number L18000290403.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." (3)

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Jacelyn Batista

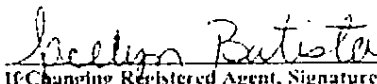
New Registered Office Address: 1370 Michigan Blvd

Enter Florida street address

Dunedin, Florida 34698
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PSTD	Jacelyn Batista	7108 Lawnview Ct	<input type="checkbox"/> Add
		Tampa, FL 33615	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2025 AUG 20 AM 8:33
CLERK OF DISTRICT COURT
JACKSONVILLE, FL

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED

2021 AUG 20 AM 8:33

SECRET

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 filing or more than 90 days after filing.) 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 August 20 2021

Joel Batista
Signature of a member

Signature of a member or authorized representative of a member:

Jacelyn Batista

Typed or printed name of signee

Filing Fee: \$25.00