

L19000020551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

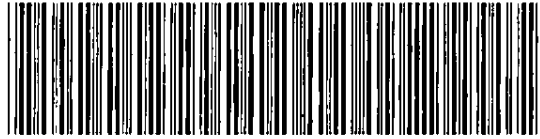
(Business Entity Name)

(Document Number)

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FILED

2024 JAN -8 PM 5:36

SEC. OF STATE
TALLAHASSEE, FL

RECEIVED

2024 JAN -8 PM 4:18

SEC. OF STATE
TALLAHASSEE, FLORIDA

43

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S'heSpeaks NOT JUST NOISE 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:

LITEENA PARKS
Name of Person

Firm/Company

10455 HUNTERS HAVEN BLVD
Address

RIVERVIEW FL 33578
City/State and Zip Code

ShespeaksNJN@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

SHE SPEAKS NOT JUST NOISE: LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

JAN 8 PM 5:36

The Articles of Organization for this Limited Liability Company were filed on 1/18/2019 and assigned
Florida document number L1900002055/

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."

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**) _____

10455 Hunters Haven Blvd.
Riverview FL 33578

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: _____

10455 Hunter Haven Blvd

New Registered Office Address: _____

Riverview, FL 33578

Enter Florida street address

Riverview
City

Florida

33578
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

MGR = Manager
AMBR = Authorized Member

[illegible]

[illegible]

(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)

Dated _____, _____

LiTeena Parks
Typed or printed name of signee

Filing Fee: \$25.00