

L19000206047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

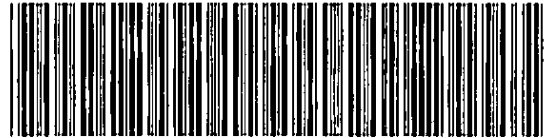
(Document Number)

Certified Copies _____ Certificates of Status _____

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0.75 + 0.25 = 1.00 **25.00

FILED

2022 APR -5 AM 7:48

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER
APR 10 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Our Abundant Life LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Josiani Stewart
Name of Person

Our Abundant Life LLC
Firm/Company

6110 Sandcrest Cir
Address

Orlando FL 32819
City/State and Zip Code

josigabriel@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Josiani Stewart at (407) 716 1562
Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OUR ABUNDANT LIFE 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:

JOSIANI STEWART

Name of Person

OUR ABUNDANT LIFE LLC

Firm/Company

6110 SANDCREST CIR

Address

ORLANDO/FLORIDA 32819

City/State and Zip Code

JOSIGABRIEL@HOTMAIL.COM

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

For further information concerning this matter, please call:

JOSIANI STEWART

407 7161562
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)

The fee was
already paid
as attached document
shows.

Thanks

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**

OUR ABUNDANT LIFE 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 08/13/2019 and assigned
Florida document number L19000206047.

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) _____

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, **Florida**
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

[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)

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.

Foran S. Smith

JOSIANI STEWART

Filing Fee: \$25.00

MARCH 29, 2022

RECEIVED

2022 APR -5 AM 11:45

ATTN: ANISSA BUTLER

SECRETARY OF STATE
TALLAHASSEE, FL

PLEASE, THIS IS MY SECOND ATTEMPT TO AMEND MY LLC. I HAVE PAID ALREADY THE \$25,00 FEE, AS YOU CAN SEE ON YOUR RECORDS AND ON THE ATTACHED DOCUMENT WITH MY CHECK PICTURE THAT WAS TAKEN FROM MY BANK ACCOUNT.

AFTER CALLING TODAY AND HAVING THE CHANCE TO SPEAK TO A CUSTOMER SERVICE AT YOUR DEPARTMENT, I WAS TOLD THAT MY REQUEST WAS DECLINED TODAY, BY YOU, BECAUSE OF INSTEAD FILING A FLORIDA LLC AMENDMENT FORM REQUEST, I HAVE SENT A FOREIGN LLC AMENDMENT FORM REQUEST.

SO HERE IS MY CORRECT AMENDMENT REQUEST, HOPEFULLY IT'S THE CORRECT ONE.

SINCERELY,

JOSIANI STEWART



Transaction Details

-\$25.00

CHECK #180

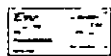
Transaction Date 03/16/2022

Posted Date 03/16/2022

Transaction Type Check

Reference
Number 2900896311

Check Number 180



Front Check Image >



Back Check Image >

Attach Receipt



Check #180
Front check image

Front

Back

JOSIANI STEWART 12/17
407-716-1562
6110 SANDCREST CIR.
ORLANDO, FL 32819

60-215/831

180

Date 03/03/2022

Pay to the order of Florida Department of State \$ 25.00
Twenty five ⁰⁰/₁₀₀ ————— Dollars

SUNTRUST

ACCOUNT 0000000004

Memo

Josiani Stewart

⑆063102152⑆1000211596399⑈ 0180

LOOK FOR FRAUD-DETECTING FEATURES INCLUDING THE SECURITY SQUARE AND HOT SPOT DETECTION DETAILS ON BACK



Back

[illegible]

ENDORSE HERE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2022

JOSIANI STEWART
6110 SANDCREST CIR
ORLANDO, FL 32819 US

SUBJECT: OUR ABUNDANT LIFE LLC
Ref. Number: L19000206047

We have received your document for OUR ABUNDANT LIFE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LIMITED LIABILITY COMPANY, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 522A00007236