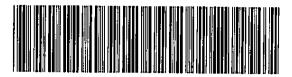
## 119000209823

(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:
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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations		
	ealth Holdings LLC	`` *	·• .
50b60c1.	Name of Lin	nted Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Shannon C Sapp		
	·	Name of Person	
	Legacy Wealth Holdings I	.LC	
		Firm/Company	
	264 Lake Drive Blvd		
		Address	
	Sebring, FL 33875		
		City/State and Zip Code	·
	shannonsapp.lfp@gmail.com		
	E-mail address: (	to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	aR:	
Shannon C Sapp		863 381-1253 at ()	
Name o	î Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for th	ne 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Set Division of Contre of 2415 N. Monre Tallahassee, Fl	rporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited I lorida document number L19000209823			and assigned
nis amendment is submitted to amend the fol	lowing:		
. If amending name, enter the new name	of the limited liah	oility company here:	
ne new name must be distinguishable and contain the	words "Limited Liabi	ility 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)		264 Lake Drive Blvd	
		Sebring, FL 33875	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		264 Lake Drive Blvd Sebring, FL 33875	
. If amending the registered agent and/or	registered office	address on our records, enter the na	ime of the new regis
gent and/or the new registered office addre	ess here:	-	
Name of New Registered Agent:		<del></del> .	· ·
New Registered Office Address:	264 Lake Drive	· · · · · · · · · · · · · · · · · · ·	P112: 12
		Enter Florida street address	
	Sebring	Florida	33875
		City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

Lagger Wealth Holdings LLC

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 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>	Address	Type of Action
AMBR	Joan Aguilar	915 Mall Ring Rd	□ Add
		Sebring, FL 33870	
			□Change
			□ Add
			□Remove
			□Change
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<b>77.66</b> . 4	1 . 10 .1								
(If an effecti Note: If	ive date is listed, the date inserted	than the date he date must be spe I in this block do e on the Departn	ecific and can les not meet	the applical	date of filing ole statutory	or more than 90 filing requires	(optional days after filinents, this da	ig.) Pursuant to 60	5.0207 (3 ted as th
he record s ord is filed	pecifies a delayo	ed effective date.	but not an e	effective tim	ne, at 12:01 a	.m. on the ear	lier of: (b)	The 90th day afte	er the
Dated	ne 2		20	021					
	AMM	M							
I	New Y	Signat	ure of a memb	ber or authori	ized represent	ative of a memb	er		
(									