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Division of Corporations Fax Number : (850)617-6383

From:

Account Name : PARASEC Account Number : I2018000086 Phone : (916)576-7000 Fax Number : (800)603-5868 FILED

\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*



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Email	Address	:

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SILVERBUTGOLD L.L.C.

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## **COVER LETTER**

#### TO: Registration Section Division of Corporations

SUBJECT: \_\_\_\_\_\_ SIL VERBUTGOLD L.L.C.

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.

Vanessa Calhoun

Name of Person

Parasec

Firm/Company

2804 Gateway Oaks Dr #100 Address

Sacramento CA 95833

City/State and Zip Code

rlsos@parasec.com E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call.

Vanessa Calhoun	at ()	854-8534
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

S \$25.00 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 .To: 18506176383 From: 12095405857 Date: 11/13/23 Time: 10:15 PM Page: 04/06

# **ARTICLES OF AMENDMENT** TO ARTICLES OF ORGANIZATION OF

	ES OF AMENDMENT TO	FILED 2023 NOV 14 PM 4: 24
ARTICLE	S OF ORGANIZATION OF	ZUZY NOV 14 PM 4: 24 SECRETART OF STATE TALLAHASSEE FLORIDA
SIL VERBUTGOLD L.L.C		SSEE, FLORID
( <u>Name of the Limited Liabil</u> (A Flond	ity Company as it now appears on our recor a Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability (	Company were filed on <u>10/11/2019</u>	and assigned
Florida document number L19000256291		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company." the designation "LLG	2" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	<u>RESS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
THE REPAIRS STATES AND AND .	Enter Florida street addre.	<i>u</i>
	۲ı	orida
	, T	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.

.To: 18506176383 From: 12095405857 Date: 11/13/23 Time: 10:15 PM Page: 05/06

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

### MGR = Manager AMBR = Authorized Member

•

Title	Name	Address	Type of Action
AMBR	LFG Legacy Founding Group LLC	8963 Torcello Way	🖸 Add
		Boynton Beach, FL 33472	DRemove
			🖸 Change
MGR	LAUREN A SILVER	8963 TORCELLO WAY	🖸 Add
		BOYNTON BEACH, FL 33472	NRemove
			🗋 Change
MGR	ADRIENNE SILVER	8963 TORCELLO WAY	🗆 Add
		BOYNTON BEACH, FL 33472	[3Remove
			🗋 Change
Mgr	Max Garcia	10076 Isle Street	D_Add
		Parker, CO 80134	E IXKemove TI
Mgr	SARAH TROCCOLI	2525 Timberwyck Trail	BPACE
		Troy, MI 48098	ExRemove
			Change
	<u> </u>		🗆 Add
			🗆 Remove
			[]]Change

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

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(If an effe <u>Note:</u>	ive date, if other than the date of filing:(optional) fective 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 605,020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a tent's effective date on the Department of State's records.	07 (3)(b) is the
If the record record is fil	d 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 led.	5
Dated	November 6	
	a $b$ $i$ $0$	
	Signature of a member of a member	

 Adrienne Silver	
 Typed or printed name of signee	

Filing Fee: \$25.00