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SECRETARY OF STATE

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations	
Bentley	's Sacred Space, LLC.	
SUBJECT:	's Sacred Space, LLC.  Name of Lir	nited Liability Company
The enclosed Articles	s of Amendment and fee(s) are sul	bmitted for filing.
	espondence concerning this matter	
	Beth Bentley	
	<del></del>	Name of Person
	Bentley's Sacred Space, L	LC.
		Firm/Company
	3110 Pass a Grille Way	
		Address
	St. Pete Beach, FL 33706	
		City/Stare and Zip Code
	beth@thezenexchange.com	to be used for future annual report notification)
For further information	n concerning this matter, please o	•
Beth Bentley		813 503-1876 at ()
Nam	e of Person	at () Area Code Daytime Telephone Number
Enclosed is a check for	r the following amount:	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ Certificate of Status Certified Copy (additional copy is enclosed)
Mailing Add		Street Address:
Registratio	n Section	Registration Section
P.O. Box 6	Corporations	Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Taliahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bentley's Sacred Space, 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 2/5/2020 Florida document number L20000036027 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 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:

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>	Address	Type of Action
mg R	Beth Bentley	3110 PGS A- Galle Way	©Ádd
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			DChange
M(-1)	Beth Bentley	3110 Pass-A-Grille Wa	Y WAdd
		St. Pole Beach, Re 3370	1 □Remove
		<del>-</del>	□ Change
			□Add
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			APRe7 PARAMETERS
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			Remote
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			□Remove
			Change
			DAdd
			🗆 Remove
			□Change

Membership Interest (	ertificates shall be issued to	the members. The int	erest represented by the		
certificates may only b	e transferred by a transfer o	f the certificate.		· ·	
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in effective date is listed, the	this block does not meet th	be prior to date of filing of	or more than 90 days after f	iling.) Pursuant t	o 605.020 e listed a
ocument's effective date o	the Department of State's	records.			
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· \	Sith Brodle	r or authorized representa			

Filing Fee: \$25.00