

L20 0000060317

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

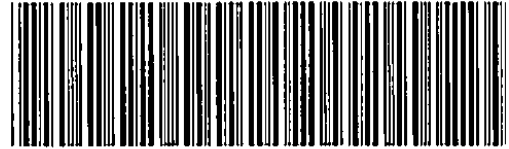
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/04/20--01027--022 +

CEM  
5/22/20

TO: Registration Section  
Division of Corporations

SUBJECT: My Axes Place 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:

Jessica Bickford  
Name of Person

My Axes Place LLC  
Firm/Company

227 Merrado Ave  
Address

Orlando, FL 32807  
City/State and Zip Code

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

For further information concerning this matter, please call:

Jessica Bickford at (407) 923-6049  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |  |  |
|--|---|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status<br>Certified Copy<br>(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 ORGANIZATION  
OF

My Axes Place LLC

2020 MAY -4 AM 8:5

(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 2/17/2020 and  
Florida document number ~~W200000019026~~ 2-24-200

This amendment is submitted to amend the following: L20000060317

**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)

50 E 5th st  
Apopka, FL 327

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 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 Co

**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 co provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this de being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liat company has been notified in writing of this change.*

**If Changing Registered Agent, Signature of New Registered A:**

**AMBR = Authorized Member**

[illegible]

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

EIN to be added : 84-503

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.

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 record is filed.

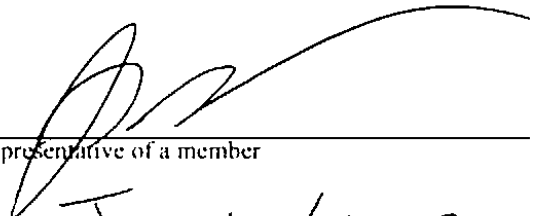
Dated 4 - 29, 2020.



Signature of a member or authorized representative of a member

Jessica Bickford

Typed or printed name of signee



Joseph Lamp