## 120000074347

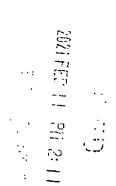
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## COVER LETTER

Registration Section Division of Corporations

TO:

Mile High i	Financial Co LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Brittany Maye		
		Name of Person	<u>,                                      </u>
	Mile High Financial Co Ll	LC	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	8880 Old Kings Rd S Unit	36	
	<del></del>	Address	
	Jacksonville, FL 32257		
		City/State and Zip Code	
	milehighfin.co@gmail.com		
	E-mail address: (	to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Brittany Maye		786 738-3987	
Name o	Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the	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	_	<u>Street Address:</u> Registration Se	ection
Division of C	orporations	Division of Cor	rporations
S25.00 Filing Fee  Mailing Address Registration S	\$30.00 Filing Fee & Certificate of Status  s: Section orporations 7	Certified Copy (additional copy is enclosed)  Street Address: Registration Se Division of Co	Certificate of Status Certified Copy (additional copy is enck ection rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mile High Financial Co 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  $\frac{03/06/2020}{2}$ and assigned Florida document number L20000074347 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: N Name of New Registered Agent: 80 old kings Rd s unit alo New Registered Office Address: Enter Florida street address . Florida <u>372り</u> 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 t 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 ador removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Brittany Maye	8880 ld Kings Rd S Unit 36	<b>≣</b> Add
		Jacksonville, FL 32257	□Remove
			☐ Change
MGR	Sanyaneeka Carter	1238 W 5TH ST	2
		JACKSONVILLE, FL 32209	<u> </u>
			□Change
			🗀 Add
			□Remove
			□ Change
		<del></del>	□Add
			Remove
			☐ Change
		-7	□Remove
			□Change
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			02/0	1/2021				
Hective ( Lan effectiv	<b>late, if other</b> e date is listed, th	than the date of the date must be spec	t tiling:		of tiling or mor	op than 90 days at	itional) Ter filing \ Possus	ant to 605 0207
<u>Note:</u> If th	e date inserted	I in this block doe	s not meet the	applicable si	tatutory filing	requirements, t	his date will no	ot be listed as
locument':	effective date	on the Departme	nt of State's r	ecords.				
record sp	ecifies a delaye	ed effective date, b	out not an effe	ective time, at	12:01 a.m. or	the earlier of:	(b) The 90th	day after the
d is filed.								
Febr	ruary 5		2021					
ated		<u> </u>		·				
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	Lalla	HON O. B	nage	· · · · · · · · · · · · · · · · · · ·	epresentative of	<u>.                                    </u>		