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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO:

ΓΟ: Registration Se Division of Cor	porations			
-STEPCAR	E-LLG NEW NAM	E-STEPS IN THE S	AND LLC.	
OBJECT.	Name of Lim	ited Liability Company	<del></del>	
The analoged Articles of	Amendment and fee(s) are sub	mitted for filing		
	ondence concerning this matter	•		
	John Secunda			
		Name of Person		
	-STEPGARE-LLC-	NEW NAME S.	TEDS IN THE S.	AND LLC
		Firm/Company		
	571 SE 12 CT			
		Address		
	Pompano Beach Florida 33	3060		
		City/State and Zip Code	<del></del>	3 25
	jonsecun@gmail.com			
For further information c	E-mail address: ( concerning this matter, please c	to be used for future annual report notifica all:	ition)	G 20
John Secunda		954 7822285 at ( )		off 1: 45
Name o	f Person		elephone Number	11015
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of St Certified Copy (additional copy is	atus &
Mailing Addres	<del></del>	Street Address: Registration Secti	on.	
Registration Section Division of Corporations		Division of Corpo		
P.O. Box 632	27	The Centre of Tal	lahassee	
Tallahassee, FL 32314		2415 N. Monroe S	street, Suite 810	

Tallahassee, FL 32303

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

STEPCARE 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 3/05/2020 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: STEPS IN THE SAND LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 571 SE 12 CT Pompano Beach, Florida 33060 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 571 SE 12 CT Pompano Beach, Florida 33060 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
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Effective date, if other the fan effective date is listed, the experience if the date inserted indocument's effective date of	date must be speci this block does	fic and canno not meet th	ne applicable statu	(optional) filing or more than 90 days after filing.) Pursuant to 60 tory filing requirements, this date will not be lis	5.0207 (3)( ted as the
record specifies a delayed d is filed.	effective date, b	ut not an ef	fective time, at 12:	01 a.m. on the earlier of: (b) The 90th day after	er the
Dated 6/15		202	20		
				/	

Typed or printed name of signee