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COVER LETTER

TO: Registration S Division of Co			
	n Hartman, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Laura Ann Hartman		
		Name of Person	
	Laura Ann Hartman, LLC		
		Firm/Company	······································
•	21 Clubhouse Place		
		Address	
	Rotunda West, FL 33947		
		City/State and Zip Code	
	laehartman@gmail.com	(to be used for future annual report notifier	etion)
For further information	concerning this matter, please c		,
Laura Ann Hartman		330 5901057	
•••	of Person	at ()	elephone Number
· · · · · · · ·		Augustine 1	orepinally realised
Enclosed is a check for	the 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 Addro Registration Division of P.O. Box 63 Tallahassee.	Section \ Corporations 27	Street Address: Registration Section Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 33	orations lahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 $\frac{4/22/2020}{2}$ Florida document number 1.20000110260 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: LAURA ANN HARTMAN Name of New Registered Agent: 21 CLUBHOUSE PLACE New Registered Office Address: Enter Florida street address _____. Florida 33947
Zip Code ROTUNDA WEST City

New Registered Agent's Signature, if changing Registered Agent:

Laura Ann Hartman, LLC

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
MGR	LAURA ANN HARTMAN	21 CLUBHOUSE PLACE	= Add
		ROTUNDA WEST, FL 33947	□Remove
			□Change
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			□Add
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ective date, if other	than the date of filing	7/14/2020 ;:	of filing or more than t	(optional) 0 days after filing.) Pursuant	u a 605 070
e: If the date inserted	in this block does not m	neet the applicable sta		ements, this date will not	
ument's effective date	on the Department of St	iate's records.			
cord specifies a delaye	d effective date, but not:	an effective time, at	12:01 a.m. on the ea	rlier of: (b) The 90th da	y after the
s filed.					
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