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## **COVER LETTER**

TO:

	legistration Se Division of Cor		-	•
cup ir co		FINANCIAL SERVICES LLC		
SUBJECT	l:	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	indence concerning this matter	to the following:	
		TIANNA FISHER		
		·	Name of Person	
		GALORE FINANCIAL S	ERVICES LLC	
			Firm/Company	
		11651 VICOLO LOOP		
			Address	
		WINDERMERE, FLORIE	DA 34786	
			City/State and Zip Code	
		GALOREFINANCIAL@G		
		E-mail address: (	to be used for future annual report notif	ication)
For further	r information c	oncerning this matter, please ca	all:	
TIANNA	FISHER		786 618-4309	
	Name o	f Person		Telephone Number
Enclosed i	s a check for th	ne following amount:		
\$25.00	0 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)
	Tailing Addres		Street Address: Registration Sec	etion
	Division of C	orporations	Division of Corp	oorations
	O. Box 632 allahassee, I		The Centre of T	
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Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## GALORE FINANCIAL SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)

	(A Fiorida Linnea L	natinity Company)			
The Articles of Organization for this Limited I Florida document number L20000113877	iability Company	were filed on APRI	L 27, 2020	and as	ssigned
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liabi	lity company here	:		
The new name must be distinguishable and contain the	words "Limited Liabili	ity Company," the desig	gnation "LLC" or th	ne abbreviation "l	L.L.C."
Enter new principal offices address, if appli	cable:			201	<u>;</u>
(Principal office address MUST BE A STRE				ري الم	= 11
				·	<del></del>
Enter new mailing address, if applicable:				·	PE
(Mailing address MAY BE A POST OFFICE	CBOX)				<u>.</u>
				•	
B. If amending the registered agent and/or agent and/or the new registered office addre		ddress on our reco	rds, <u>enter the n</u>	ame of the ne	<u>w registered</u>
Name of New Registered Agent:	TIANNA FISH	ER			
New Registered Office Address:	7557 W SAND LAKE RD #1261				
		Enter Florida	street address	_	
	ORLANDO		, Florida	32819  Zip Code	
		City		Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as register, provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete pistered agent as pinced registered office of the control of the	performance of my provided for in Cha	duties, and La pter 605, F.S. (	ım familiar w. Or, if this doc	ith and rument is

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>	<u>Address</u>	Type of Action
AMBR	TIANNA FISHER	11651 VICOLO LOOP WINDERMERE, FL 34786	□Add
		<del></del>	=Remove
		<del></del>	□Change
MGR	TIANNA FISHER	7557 W SAND LAKE RD #1261	<b>=</b> Add
		ORLANDO, FL 32819	□Remove
			□Change
<del></del>			🗆 Add
		<del> </del>	□Remove
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			□Remove
			□Change

frective date, if other than the date of filing:	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list incument's effective date on the Department of State's records.  The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afficient is filed.  The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afficient date.	<del></del>
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is filed.  ated JUNE 11 2020	k does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
ated	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	gnature of a member or authorized representative of a member
Signature of a member of authorized representative of a member	

Filing Fee: \$25.00