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05/04/20--01012--022 \*\*25.00



Jared Coffin

549 Wymore Road North

Suite 208

Maitland, FL 32751

To Whom It May Concern:

While electronically filing my LLC on SunBiz, I accidently misspelled the company name and reversed two letters. I filed the company with the spelling OM Analtyics, LLC. However, it was meant to be OM Analytics, LLC. While typing fast I accidently reversed the Y and the T. I am filing to have this corrected. Please see enclosed documents and check for payment.

All the best,

Jarred Coffin

(321) 246-2224

## **COVER LETTER**

	gistration Se rision of Cor			
eub irct.	OM Analty			
SUBJECT:		Name of Lim	ited Liability Company	<del></del>
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	ı all correspo	ondence concerning this matter	to the following:	
		Jared Coffin		
			Name of Person	
			Firm/Company	
		549 Wymore Road North,	Suite 208	
			Address	
		Maitland, FL 32751		
		jcoffin28@gmail.com E-mail address: (	City/State and Zip Code to be used for future annual report no	etification)
For further i	nformation c	oncerning this matter, please c	·	
Jared Coffin	1		321 246-2224 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	a check for th	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)
	iling Addres gistration S		Street Address: Registration S	ection
Di	vision of C	orporations	Division of Co	orporations
P.(	D. Box 632	7	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida	y Company as it now appears on our rec Limited Liability Company)	eords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 4/28/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
OM Analytics, LLC		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2020 SEC
(Principal office address MUST BE A STREET ADDRI	ESS)	<b>A</b> Y
		(A) 1
		<u> </u>
Enter new mailing address, if applicable:		25: 7:
(Mailing address MAY BE A POST OFFICE BOX)		# Z
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>en</u>	ter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	druss
	•	Florida
	City	Zip Code

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

OM Analtyies, 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
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			Remove
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			□ Change
			□Remove
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			□ Change
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			TChange

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Typed or printed name of signee