L20000 124537

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411195 657		STEP BABY CONSULTING	•			
SUBJEC	~I; <u></u>	Name of Limited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		Nikita Schupbach				
		.	Name of Person			
		STEP BY STEP BABY CO	ONSULTING LLC			
			Firm/Company			
		1010 Highland St				
			Address			
		Montrose, CO 81401				
			City/State and Zip Code			
		schupbach220@gmail.com			S 🔀	
		E-mail address: (to be used for future annual report notification	on)	2020 F	(3
For furth	ner information e	oncerning this matter, please ca	all:			11~25
Nikita S	chupbach		720 441-8608		20	(dr. (5) em
-10	Name o	f Person		ephone Number		,
						~~~
Enclosed	l 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)	Certified C	of Status &	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STEP BY STEP BABY CONSUTLING LLC	
( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	it now appears on our records.) sy Company)
The Articles of Organization for this Limited Liability Company were Florida document number L20000124537	filed on MAY 07, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	mpany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	
Trincipal office didiction most man instance in the man	
Enter new mailing address, if applicable:	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	ess on our records, enter the name of the new registered
Name of New Registered Agent:	<del></del>
New Registered Office Address:	Enter Florida street address
	CARCE FOR RIGISH CCI (CRITESS)

## 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 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 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
CEO	Ariana Gonzalez	3680 Leghorn Rd	
		Malabar, FL 32950	□Remove
			□Change
Α	Nikita A Schupbach	1010 Highland St	
		Montrose, CO 81401	□Remove
<del></del>		<del> </del>	□Add
		<del> </del>	
			2020 Change
			Spending
			☐ ☐ Remove
			Change
			□Add
		<del></del>	□ Rепкоvе
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			Remove
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ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be price  fote: If the date inserted in this block does not meet the appliance ocument's effective date on the Department of State's record	ior to date o	of filing or m tutory filing	ire than 90 da g requiremen	( <b>optional</b> lys after filing lts, this date	) 2.) Pursuant 2 will not b	to 605.020 be listed a
record specifies a delayed effective date, but not an effective is filed.	e time, at 1	2:01 a.m. c	on the earlie	rof:(b) T	he 90th day	y after th
ated August 6 2020	······································					
Signature of a member or aut	ithorized re	presentative	of a member			_

Filing Fee: \$25.00