L20 000131822

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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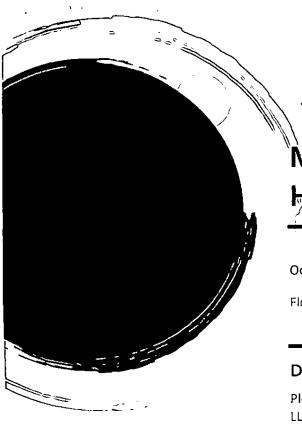


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10/23/20--01018--024 ++60.00

12/2/20

FILED 2020 DCT 23 AM II: 37



Marlene Hallgren

October 14th, 2020

Florida Department of State

P.O. Box 6327
Tallahassee, FL 32314

Dear Florida Department of State,

Please see attached revision form and check for Marly, Kassy & Mike,

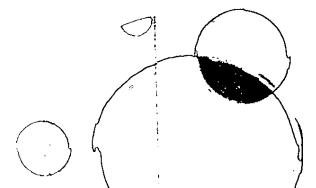
LLC. The filed document number is LC20000131822 LLC. The filed document number is LC20000131822.

11985 SW Highway 484 Dunnellon, FL 34432

352-342-7018

hccmarly@gmail.com

Sincerely, Marlene Hallgren



COVER LETTER

TO:

TO: Registration Division of C					
Mariy, K	assy & Mike, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	emitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Marlene Hallgren				
		Name of Person			
	Marly, Kassy & Mike, LL	C			
		Firm/Company			
	11985 SW Highway 484				
		Address			
	Dunnellon, FL 34432				
		City/State and Zip Code			
	heemarly@gmail.com	to be used for future annual report no	7.0		
For further information	E-mail address: (n concerning this matter, please c	·	uncation)		
Marlene Hallgren		352 342-7018			
Nam	e of Person	at () Area Code Dayti	me Telephone Number		
Enclosed is a check fo	r the 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Add Registration		Street Address: Registration S	ection		
_	Corporations	Division of Co	Division of Corporations		
P.O. Box 6		The Centre of			
l allahassed	c, FL 32314	2415 N. Mont	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marly, Kassy & Mike, LLC	
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) i Limited Liability Company)
The Articles of Organization for this Limited Liability Control of	Company were filed on May 15th, 2020 and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
he new name must be distinguishable and contain the words "Lim	ited 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 ADDI	RESS)
	<u></u>
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the name of the new regis</u> t
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida

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.

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	Marlene Hallgren	11985 SW Highway 484	□Add
		Dunnellon, FL 34432	□Remove
			ange
AMBR	Marlene Hallgren	11985 SW Highway 484	
		Dunnellon, FL 34432	Remare
			ည် □Change
MGR	Kassandra Hallgren	11985 SW Highway 484	□Add
		Dunnellon, FL 34432	■Remove
			Change
MGR	Michael Hallgren	11985 SW Highway 484	
		Dunnellon, FL 34432	■Remove
			Change
•			□ Add
			Remove
			[]Change
-			□Add
			□Remove
			□ Change

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ffective date, if other an effective date is listed, the date inserted the date.	he date must be specif I in this block does	lie and cannot be prior to o	date of filing or more than	(optional) n 90 days after filing, irements, this date	Pursuant to 605.0207 (will not be listed as t
ocument's effective date					
record specifies a delaye	ed effective date, bu	it not an effective time	, at 12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
record specifies a delaye I is filed. October 12th		at not an effective time	, at 12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
record specifies a delaye I is filed. October 12th	Janu /	2020			e 90th day after the
record specifies a delayed is filed.	Janu /				e 90th day after the

Filing Fee: \$25.00