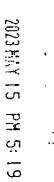
L2 000 173457

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



400408454444

05/15/23--01017--037 **25.00



Office Use Only

Cr 71,012023

COVER LETTER

		istration Sec sion of Corp			••			
eum uz	· g · .	PennTek U:						
SUBJEC	.1:	Name of Limited Liability Company						
The encl	osed	Articles of a	Amendment and fee(s) are sub	omitted for filing.				
Please re	turn	all correspo	ndence concerning this matter	to the following:				
			Sofia Vasquez					
				Name of Person				
			ZenBusiness INC					
				Firm/Company	•			
			336 E. College Ave Suite	301				
				Address				
			Tallahassee, FL 32301					
				City/State and Zip Code				
			fulfillment@zenbusiness.co					
			E-mail address; (to be used for future annual report notification)				
For furthe	er in	formation co	oncerning this matter, please ca	all:				
e/o Zenl	Busii	ness INC		844 493-6249 at ()				
		Name of	Person	Area Code Daytime Telephone Number				
Enclosed	is a	check for the	e following amount:					
■ \$25.0	00 Fi	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Certified Copy (additional copy is enclosed)	f Status & Dy			
_		ing Address	_	Street Address:				
Registration Section Division of Corporations				Registration Section Division of Corporations				
		. Box 6327		The Centre of Tallahassee				
Tallahassee, FL 32314				2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 55 **OF**



PanaTak HSA LLC

2023 MAY 15 PM 5: 19

Tellifick USA LLX.				
(Name of the Limited (A	Liability Company Florida Limited Liab	as it now appears on ou olity Company)	r records.)	·
The Articles of Organization for this Limited Liab	oility Company we	re filed on <u>06/22/202</u>	0	and assigned
Florida document number L20000173457				-
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liabilit	y company here:		
EMPOWERED_LEGACY_ALLIANCE LLC				
The new name must be distinguishable and contain the word	ds "Limited Liability	Company," the designation	on "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:			
(Principal office address MUST BE A STREET	ADDRESS)			
	_	<u> </u>		
Enter new mailing address, if applicable:	_			<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u>2X)</u> _			
	_			
B. If amending the registered agent and/or regagent and/or the new registered office address?	istered office add <u>here:</u>	ress on our records.	, <u>enter the n:</u>	<u>ime of the new registered</u>
Name of New Registered Agent:				
New Registered Office Address:				
The Magneted Office Paddets.	_	Enter Florida stree	t address	
	_		Florida	
		City		Zip Code
New Registered Agent's Signature, if changing Reg	gistered Agent:			
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the reg company has been notified in writing of this ch	and complete per ered agent as pro gistered office ad	rformance of my dua vided for in Chapter	ties, and I ar r 605, F.S. C	n familiar with and Fr, if this document is

	If Changin	g Registered Agent, <u>Sig</u> r	nature 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

Title	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			□Change
			□Remove
			□Change
			🗆 Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
		- 	Change
			🗆 🗆 🗆 🗆 Add
			Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□ Change

								_
							<u> </u>	
			·-·			_		_
								_
_								_
	 -							<u> </u>
	<u> </u>			· -				_
								_
								
			· · · · · · · · · · · · · · · · · · ·					
								_
						 _		_
		- <u>-</u>			·		- ana	_
				<u> </u>				<u> </u>
		- -		<u>. </u>				_
Note: If the da	le inserted in th	the date of file the must be specifical tis block does no the Department o	ot meet the app	olicable statutoi	ng or more than ry filing requir	(option 90 days after fil ements, this d	al) ing.) Pursuant to 6 ate will not be 1	05.0207 isted as
locument's effi					1			
record specific	s a delayed effi	ective date, but i	not an effectiv	e time, at 12:01	i a.m. on the ea	arlier of: (b)	The 90th day a	ter the
record specified is filed.					a.m. on the ea	arlier of: (b)	The 90th day a	ter the
record specific d is filed. Dated		ective date, but r			a.m. on the ea	arlier of: (b)	The 90th day a	ter the
e record specific rd is filed. Dated			. 2023				The 90th day a	ter the

Filing Fee: \$25.00