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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Div	ision of Cor	porations		.	
, and the	Journals for	r Life, LLC	e e		
SUBJECT:	•	Name of Lim	ited Liability Company		
The enclosed	f Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ondence concerning this matter	_		
		Steven Warren			
			Name of Person		
		Journals for Life, LLC			
			Firm/Company	· · · · · ·	
		3210 Tower Oaks Drive			
			Address		
		Orange Park, FL 32065			
			City/State and Zip Code		
		awarren1802@gmail.com			
Prom Bondhood	·· C		to be used for future annual report	(notification)	
		oncerning this matter, please ca		_	
Steven Warren			318 880-558 at ()		
	Name o	t Person	Area Code Da	sytime Telephone Number	
Enclosed is a	a check for th	he following amount:			
■ \$25.00 F	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		Street Addres	w aa	
Registration Section Division of Corporations			Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Journals for Life, LLC			
(Name of the Limited 1	.iability Company as it now appears on our reco Florida Limited Liability Company)	ords.)	
(//)	rionda Ettimed Etability Company)	19 19	
The Articles of Organization for this Limited Liabi	lity Company were filed on 6/26/2020	atm assigned	
Florida document number 1.20000179082	······································	22	
This amendment is submitted to amend the followi	ពម្ម:		
A. If amending name, enter the new name of th	e limited liability company here:	08: 09 8: 09	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable:		····	
(Mailing address MAY BE A POST OFFICE BO	X)		
B. If amending the registered agent and/or registered agent and/or the new registered office address h		er the name of the new registered	
	·		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street ad		
		Florida	
-	City	Zip Code	

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
AMBR	Andrea Warren	3210 Tower Oaks Drive	
		Orange Park, FL 32065	□Remove
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change

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ective date, if othe	than the date of fili	ng:		(optional) days after filing.) Pursuant to	
effective date is listed, te: If the date inserte	the date must be specific a d in this block does not	nd cannot be prior to date meet the applicable s	of filing or more than 90 tatutory filing requires	days after filing.) Pursuant to tents, this date will not be	605.0207 Historias
	e on the Department of		actiony ming requirem	iens, mo date will not be	insied us
	ed effective date, but n	ot an effective time, a	12:01 a.m. on the earl	ier of: (b) The 90th day	after the
s filed.					
ted		2020			
	5	Thur			
	Signature of	a member or authorized	representative of a memb	er	_
STEVEN W.	ARKEN				