

h20000 196158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

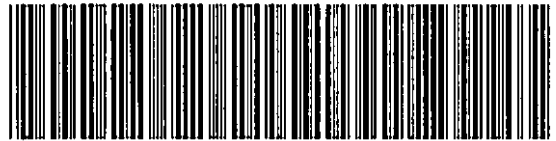
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

YES  
10/9/21

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Women 4 Changes LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Janelle Jackson  
Name of Person

\_\_\_\_\_  
Firm/Company

7601 Fort Walton Ave  
Address

Fort Pierce FL 34951  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

U.S. DEPARTMENT OF STATE  
TALLAHASSEE, FL

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For further information concerning this matter, please call:

Janelle Jackson at (851) 7654  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

**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**

Women 4 Changes LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 7/19/2020 and assigned Florida document number L20000196158

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Janelle JACKSON LLC

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

7601 Fort Walton Ave  
Fort Pierce FL 34951

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

7601 Fort Walton Ave  
Fort Pierce FL 34951

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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CLERK OF STATE  
TALLAHASSEE, FL

2021 OCT -4 PM 3:11  
SHERIFF OF STATE  
TALLAHASSEE FL

2021 OCT -4 PM 3:11  
SHERMAN COUNTY  
TALLAHASSEE FL

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9/27/202

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated September 27, 2021

Lanette Jackson

Signature of a member or authorized representative of a member

Signature of a member of authorized representation  
Janelle Jackson  
Typed or printed name of signatory

Typed or printed name of signee