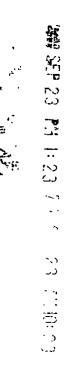
L 2000198577

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

Office Use Only



000352553300



115

C GOLDEN SEP 2.4 2020

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 9/23/2020	-		#WALK IN#
ENTITY NAMEKEEPE	ROFCONSCIENCE L	LC	77.22.01
ENTITY NAME (NEE)			
DOCUMENT NUMBER_			
	PLEASE FILE THE	E ATTACHED AND RETURN	
XXXX	Plain Copy		
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts Certificate of Good Sta		
	APOSTILLE' / N	OTARIAL CERTIFICATION	
COUNTRY OF DESTINAT NUMBER OF CERTIFICA			
TOTAL OWED \$25.00		ACCOUNT #: I20160000072	2
Please call Tina at th	he above number for a	any issues or concerns. Thank you so	much!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KeeperofConscience LLC

53 m. 10: 30

(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.20000198577	were filed on 07-10-2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	382 NE 191st St PMB 16801	
(Principal office address MUST BE A STREET ADDRESS)	Miami, Florida 33179-3899 US	
Enter new mailing address, if applicable:	382 NE 191st St PMB 16801	
(Mailing address MAY BE A POST OFFICE BOX)	Miami, Florida 33179-3899 US	
registered agent and/or the new registered office address her Name of New Registered Agent:	<u>e</u> :	
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F	d I am familiar with and E.S. Or, if this document is
If Chai	nging Registered Agent, <u>Signature o</u> l	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>
AMBR	Charles Bryant	382 NE 191st St PMB 16801	
		Miami, Florida 33179-3899 US	
			Remove
		,	☐ Remove
			Change
			□ Add
			□ Remove
			Change
			□ Remove
			Change
			☐ Remove
			Change
			Add
			☐ Remove
			Change

E. Effective date, if other than to (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 lock does not meet the applicable statutory filing requirements, this date will not be listed as
(f the record specifies a delay (b) The 90th day after the re	d effective date, but not an effective time, at 12:01 a.m. on the earlier of ord is filed.
Dated	2020
/S/ Charles Bry	ที่นั้ Signature of a member or authorized representative of a member
 v	Signature of a member or authorized representative of a member
Charles Bryant	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00