# K200000213343

(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:			

Office Use Only



400391443874

00/01/12 %00000 --010 \*\*60.00

2022 AUG - 1 PH 2: 3' SECRETARY DE STAT

الرهمز



July 28, 2022

To whom it may concern,

Enclosed is the signed form to amend the name our our LLC with payment of \$60.00. I can be reached at (813) 369-9871.

Thank you,

Tiara Harris

2022 AUG -1 PM 2: 3"

5 Star Google Rated

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJE	T: Favored Management LLC Jame of Limited Liability Company	
	sed Articles of Amendment and fee(s) are submitted for filing.	
Please r	arn all correspondence concerning this matter to the following:	
	Tiara Harris	
	Name of Person	
	Ford Management LCC	
	S502 N. Dts Ave	
	City/State and Zip Code	
	E-mail address: (to be used for future admual report notification)	
For furt	r information concerning this matter, please call:	
	Tiara Harris at (813) 369-9871	
	Name of Person Area Code Daytime Telephone Number	
Enclose	is a check for the following amount:	
□ <b>\$</b> 25	0 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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

FILED

Favored Manager	nt LC	2022 AUG - 1 PM 2: 37	
( <u>Name of the Limited Lia)</u> (A Flor	bility Company as it now appears of rida Limited Liability Company)	TALLAHASSEE, FL	
The Articles of Organization for this Limited Liability			
Florida document number <u>L20000 2133 4</u>	<u>3</u> .		
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li  The new name must be distinguishable and contain the words "L			
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD)	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register agent and/or the new registered office address here		rds, <u>enter the name of the new registered</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	City	Florida Zip Code	
	Cu,	zy, 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
			□Add
		1111	□Remove
		<del>-</del>	□Change
<u></u>			□Add
			Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheet.	
	<u>υ</u>
	<b>17</b> AL
	UG-) AHAS
	SSET 32 IT
	FFAIR 81
	<del> </del>
Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 on Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlicord is filed.	ier of: (b) The 90th day after the
Dated July 28th 2022.  Signature of a member or authorized representative of a member.	:r
Tiuz M. Haris Typed or printed name of signee	·

Filing Fee: \$25.00