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COVER LETTER

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TO: Registration So Division of Cor			
SUBJECT: I	Spiration Pa	utnus, LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Theresa	Blanut Name of Person	
	Realty (ONE Group I	nspiration
	8609 Vis	La Shores (Lourt
	Orland	City/State and Zip Code	3 le
	E-mail address: (to be used for Juture annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
Theresco	Blahut	at (407) 590 Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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



2021 FFT - 4 101 7: 08

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 28, 2021

THERESA BLAHUT 8609 VISTA SHORES COURT ORLANDO, FL 32836

SUBJECT: INSPIRATION PARTNERS, LLC

Ref. Number: L20000237883

We have received your document for INSPIRATION PARTNERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

PLEASE COMPLETE/SUBMIT THE FORM IN ITS ENTIRETY AS THE LAST PAGE IS MISSING.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00002014

Irene Albritton Regulatory Specialist II

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2021

THERESA BLAHUT 8609 VISTA SHORES COURT ORLANDO, FL 32836

SUBJECT: INSPIRATION PARTNERS, LLC

Ref. Number: L20000237883

We have received your document for INSPIRATION PARTNERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete/submit the form in its entirety as there are pages missing.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 721A00000835

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limi	ted Liability Compan (A Florida Limited L	y as it now appears of ability Company)	on our records.)	
The Articles of Organization for this Limited L	iability Company o	were filed on $\frac{\mathcal{E}}{3}$	14/202	and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of the new name must be distinguishable and contain the variations.	<u>ala</u>			obreviation "L.L.C."
Enter new principal offices address, if applic	able:			1-3
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:			· · · · · · · · · · · · · · · · · · ·	1
(Mailing address MAY BE A POST OFFICE	BOX)		 - ·	· · · · · · · · · · · · · · · · · · ·
				27
B. If amending the registered agent and/or agent and/or the new registered office addre	ss here:	ddress on our rec	ords, enter the nam	: ne of the new registered
New Registered Office Address:	6965	Pic 770	Carcule	Cluenue Ellolo
	Orlan	r (L.S City	, Florida	32835 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>	Name	Address	Type of Action
<u>AMBR</u>	Blake Blakyt	2516 Hargill Dr	UC □Add
		Orlando, FL 32806	(XRemove
		32806	□Change
			□Add
			[]Remove
			[] Change
			□Remove
			□Change
			□Add
			Remove
			□Change
			□ Add
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			□Remove
			□ Change

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Signature of a member or authorized representative of a member

| C | C | C | C |
| Typed or printed name of signee