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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FREEDOMTAX ACCOUNTING & MULTISERVICES, INC.

Account Number : 120180000068

Phone : (407)344-1012

Fax Number : (407)344-1371

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SECRETS SOCIETY FL LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETS SOCIETY FL LLC	
(Name of the Limited Liability Company as it now appears on our reco (A Florida Limited Liability Company)	orda,)
The Articles of Organization for this Limited Liability Company were filed on 08/12/2020	and assigned
Florida document number L20000246275	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	7070
(Mailing address MAY BE A POST OFFICE BOX)	65
muang martis hill to be to the total of the	<u> </u>
	> 1
B. If amending the registered agent and/or registered office address on our records, entagent and/or the new registered office address here:	er the name of the new registered
agent and of the new registered extra fluor and act of	50
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street add	tress
	Florida
City New Banistered Agent's Signature, if changing Registered Agent	Ztp 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 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	<u>Address</u>	Type of Action
MGR	Callahan III, James A.	12151 Cypress Landing Ave	<b>B</b> Add
		Clermont, PL 34711	
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			□Rcmove
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an effe Note: I	ctive date is listed f the date inser	er than the date d, the date must be spe ted in this block do late on the Departm	ecific and can es not meet	not be prior to the applicab	date of filing or le statutory fil	more than 90 ling requirem	(optional) days after filing; ents, this date	Pursuant to 605.020 will not be listed as
record d is file		ayed effective date	but not an	effective tim	e, at 12:01 a.n	n, on the earl	ier of: (b) Th	e 90th day after the
ated <sup>1</sup>	August 31st		2	1020	_•			
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