L20 000260496

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(bocument Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 16, 2021

NANCY MCINTOSH PAYNE 5485 TABB AVE SPRING HILL, FL 34609 US

SUBJECT: ADVOCACY SUPPORT GROUP, LLC

Ref. Number: L20000260496

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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: 821A00022438

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section

Division of C	•			
SUBJECT: Advocac	y Support Group, LLC			
Na	me of Florida Limited Par	tnership or Limited I.	iability	Limited Partnership
The enclosed Certific	cate of Amendment ar	nd fee(s) are subm	nitted f	or filing.
Please return all corr	espondence concernir	ng this matter to:		
Nancy McIntosh Payne				
	Contact Person		-	
Advocacy Support Grou	p, LLC			
-	Firm/Company	,	-	
5485 Tabb Ave				
	Address		-	
Spring Hill, FL 34609				
	lity, State and Zip Code		-	
nancywsc@hotmail.cor	n			
E-mail address: (to	be used for future annual	report notification)	-	
For further informati	on concerning this ma	atter inlease call:		
Nancy McIntosh Payne		012	210.6	07.1
Name of Contac	at Daman	at (813	$\frac{210-68}{212}$	
Name of Contac	ct Person	Area Code an	id Dayti	me Telephone Number
Enclosed is a check t	or the following amor	unt:		
S52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	S105.00 Filing and Certified Cop		□\$113.75 Filing Fee. Certified Copy. and Certificate of Status
Mailing Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231		The Cer 2415 N	ation S n of Co ntre of . Moni	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 OCT 22 AM 6:53

Advacacy (Same of the Limited Lightlit	Su ROOFF	Group.	ASERRY OF CIA
(<u>Name of the Limited Ligbilit</u> (A Florida	y Company /s/t now appears Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Co Florida document number $\underline{L20000260}$	ompany were filed on	8-24-20	020 and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here	<u>e</u> :	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the des	ignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			<u></u>
(Principal office address MUST BE A STREET ADDR	ESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	 		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our rec	ords, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:			
New Registered Office Address:	•		
	Enter Florid	a street address	
	City	, Florida	Zip Code
N. B. Carlotte at Oliver and A. Carlotte	cu).		Lip 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
AMBR	Bruno, Rosario, JR	1340 Corper Oaks H	<u>}</u> □Add
		Brandon, FL 33510	2 Decemove
			DChange
			□Add
			□Remove
			Change
			□Add
			□Remove
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			Chanas

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ote:	re date, if other than the date of filing: 9-1-2-2/ (optional) three date is listed, the date mast be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 603-03 I the date inserted in this block does not meet the applicable statutory filing (equirements, this date will not be listed a control of the Department of State's records.
ecord 15 file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
ned	October 6 2021
	Signature of a member or authorized representative of a member
	organities in a member of authors and
	Rosa-io Bruno Vr,