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T. MATTHEWS NOV 2 4 2021

## **COVER LETTER**

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TO: Registration Section Division of Corporations
SUBJECT: This Space Between LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rebecca Waite
This Space Botween IIC
POBOX 44 1399 New Scotland Rd.
Singerlands W 12159  City/State and Zip/Code  Rebecca a this since Between com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Reversal at (127), 223 – 1303  Name of Person  at (127), 223 – 1303  Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 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

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This Space Between Liability Company as it now appears on our records.) Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_ and assigned Florida document number 62000321309. 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 (nust be distinguishable and contain the words "Limited Liability Company," the designation "LLC" 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: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Registered Agents inc Name of New Registered Agent: 7901 4th St. N suite 300 New Registered Office Address: Enter Florida street address \_\_\_, Florida 33702 Zip Code Saint Petersburg

## 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		Address 21 NOV 12 PN 3	;: 26
Title	<u>Name</u>	Address 21	Type of Action
NX			
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ffective date, if other than the date of fili an effective date is listed, the date must be specific a lote: If the date inserted in this block does not occument's effective date on the Department of	and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ( t meet the applicable statutory filing requirements, this date will not be listed as t
record specifies a delayed effective date, but no	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated 11 5 2021	_,
Signature of .	a member or authorized representative of a member
(- 1/ 2/	Perca Wite Typed or printed name of signee

Filing Fee: \$25.00