L20000358425

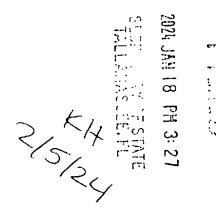
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900421881299

01/18/24--01009--005 **25.00



COVER LETTER

TO:

· · · · · · · · · · · · · · · · · · ·	
SUBJECT: Late Bloomers Mativation AND Empowerment Name of Limited Liability Company LLC	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Lashunda Hall Name of Person	
hate Bloomers Motivation and Empowern	lent
15621 SW 113 AVE	
City/State and Zip Code Mulatebloomers annual report notification) E-mail/address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	1 j
For further information concerning this matter, please call: La Shunda Hall at (305) 9(07-207777777777777777777777777777777777	.
Encloset is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Late Bloomers Manne of the Limited Liability Compan (A Florida Limited Li	tivation and Emparernent LC
(A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v) i
Florida document number <u>L20000358</u> 425	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	y 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:	
	-11 - 12 - 13 - 13 - 13 - 13 - 13 - 13 -
Mailing address MAY BE A POST OFFICE BOX)	The state of the s
B. If amending the registered agent and/or registered office ac	ddress on our records, enter the name of the new registered
agent and/or the new registered office address here:	I c w
	ATE 27
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida Zin 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>	<u>Name</u>	Address	Type of Action
AMBR	Owens, Fabian J	15621 Sw 113 Ave	🗆 Add
	Jr.	15621 Sw 113 Ave Miami, FL 33157	Remove
			□Change
AP	Hall, Carter O	15621 Sw 113 Ave	□Add
		Miami, FL 33157	
			□ Change
			
			Remove
		<u></u>	□Change
		·	
		· · · · · · · · · · · · · · · · · · ·	□ Add □ Remove □
			CD Change
			9: 27dd □Add
-			□Remove
			□Change
			DAdd
			□Remove
			□ Change

									 -	
						·				
					•					
										
					<u></u>					
						_				
										
						-				
					· · · · · · · · · · · · · · · · · · ·					
										
	<u> </u>									
		 						-		
		-								
								, ,	 42 û Z	•
				1 1					至	# 179°
ffective date, if an effective date is	f other than t	he date of fil	ling:	110/2	024	(0	ptional) <u> </u>	ω ω	ر م
lote: If the date	inserted in this	block does no	ot meet the a	pplicable star	tutory filing re	quirements.	this dat	e will not	berlisted	as.
locument's effect	tive date on the	Department of	of State's rec	ords.				STA	ယ္ 2	10
record specifies	a dolarad affac	tive date, but	not an effect	ive time at 1	2:01 a.m. on:	the earlier o	⊕ (Ь) Τ	त्यां	N Nav after the	he
d is filed.	a delayed ence	tive date, out	not an effect	ive time, at i	2.01 a.m. on	ine carner o	1. (0)	ne zom a	ay arter ti	ii.
Q										
Dated <u>Otv</u>	MICY	10	_, _2	024.						
		•	. / .	/)						
	Sell!		Jase	/						
4	Jeft_	Signature of	a member or	authorized re	presentative of	a member				