(Requestor's Name)  (Address)	000402085480
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	02/27/2301047005 **25.00
(Document Number)	
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## COVER LETTER

	gistration Serision of Cor			
SUBJECT:		werage Advisor LLC	ą	
SOBILCT.		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	ı all correspo	ondence concerning this matter	to the following:	
		Liana G.		
			Name of Person	<del></del>
		ZenBusiness Inc.		
			Firm/Company	<del>, , ,,</del>
		336 E College Ave, Ste 30	)1	
		···	Address	······································
		Tallahassee, FL 32301		
		га@zenbusiness.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report no	otification)
For further i	nformation c	oncerning this matter, please c	all:	
Liana C/O 2	ZENBUSINE	SS INC.	844 493-6249 at ( )	
	Name o	f Person		ime Telephone Number
Enclosed is	a check for th	ne following amount:		
<b>\$25.00</b>	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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Not Your Average Advisor LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records Diability Company)	(,
he Articles of Organization for this Limited Liability Company	were filed on 01/01/2021	and assigned
lorida document number L20000365799		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
Not Your Average Tax Preparer LLC		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		~~~~
Principal office address MUST BE A STREET ADDRESS)		2023 FE
		2
Inter new mailing address, if applicable:		NSS T
Mailing address MAY BE A POST OFFICE BOX)		Bar B
ranning address MAT BLATOST OFFICE BOAT	<del>- · · ·</del>	
		<del>' । । । । । । । । । । । । । । । । । । ।</del>
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
	City	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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
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	the date of filing:	ON APPROVAL	or more than 90 days after	nal) filing ) Pursuant to 605 020
ote: If the date inserted in this	s block does not meet the	applicable statutory t	iling requirements, this	date will not be listed a
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effe	s block does not meet the e Department of State's r	: applicable statutory I ecords.	iling requirements, this	date will not be listed a
ote: If the date inserted in this ocument's effective date on the record specifies a delayed effertise filed.	s block does not meet the e Department of State's re ctive date, but not an effe	eapplicable statutory fecords.	iling requirements, this	date will not be listed a
ffective date, if other than an effective date is listed, the date of the listed in this ocument's effective date on the record specifies a delayed effect is filed.  Feb. 16  /s/ Damian Cinf	s block does not meet the Department of State's rective date, but not an effe	eapplicable statutory fecords.	iling requirements, this	date will not be listed a