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COVER LETTER

TO:

TO: Registration S Division of Co			
	Advisor LLC		
SUBJECT:	Name of Lim	ited Liability Company	
		10 A C + CV	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filling.	
Please return all corresp	ondence concerning this matter	to the following:	
	Dorothy Johnson		
		Name of Person	
	Diversified Taxes & Finan	icial Services, Inc.	
		Firm/Company	
	13154 Spring Hill Dr		
		Address	
	Spring Hill, FL 34609		
		City/State and Zip Code	
	dorothy@diversifiedtaxes1		_
	E-mail address: (to be used for future annual report notifi-	cation)
For further information	concerning this matter, please c	all:	
Dorothy Johnson		352 683-5198 at ()	
Name	of Person		Telephone Number
Enclosed is a check for	the following amount:		
S25.00 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)
			I
Mailing Addre		Street Address:	
Registration		Registration Sec	
	Corporations	Division of Corp The Centre of Ta	
P.O. Box 63 Tallahassee,			Street, Suite 810
i ananassee,	1 L 32317	Tallahassee, FL	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

The Arcicles of Organization for this Limited Liability Company were filed on 1/25/2021 and assigned Florida document number L21000044600 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 coust be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Erika McLagan 12392 Fillmore St Enter Florida street address	360 Life Advisor LLC		2025 JUH 18 AH 11:
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 "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new malling 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: Name of New Registered Agent: New Registered Office Address: Erika McLagan 12392 Fillmore St Enter Florida street address	Name of the Lim	ited Liability Company as it now app- (A Florida Limited Liability Company	ears on our escards)
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 "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new malling 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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Erika McLagan 12392 Fillmore St Enter Florida street address	Florida document number L21000044610	·	1/25/2021 and assigned
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Name of New Registered Agent: New Registered Office Address: 12392 Fillmore St Enter Florida street address	A. If amending name, enter the new name	of the limited liability company	here:
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: Name of New Registered Agent: New Registered Office Address: Erika McLagan 12392 Fillmore St Enter Florida street address	Enter new principal offices address, if appli	cable:	e designation "LLC" or the abbreviation "L.L.C."
Name of New Registered Agent: New Registered Office Address: New Registered Office Address: 12392 Fillmore St Enter Florida street address		<u></u>	
Name of New Registered Agent: New Registered Office Address: 12392 Fillmore St Enter Florida street address	B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our	records, enter the name of the new register
New Registered Office Address: Enter Florida street address	Name of New Registered Agent:	Erika McLagan	
Enter Florida street address	New Registered Office Address:		
Spring Hill Florida 34009			
City Zip Code			Florida 34609

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>	<u>Address</u>	Type of Action
MGR	Daniel McLoughlin	12392 Fillmore St	
		Spring Hill, FL 34609	■Remove
			□Change
MGR	Erika McLagan	12392 Fillmore St	□Add
		Spring Hill, FL 34609	□Remove
			□Add
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	77
 Wi	Tith Erika now being the sole member of 360 Life Advisor, her title will change to MGR2025 JUN 18 A	
		43
		
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ote: Li t	e date, if other than the date of filing: (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant the date inserted in this block does not meet the applicable statutory filing requirements, this date will not it's effective date on the Department of State's records.	1 to 605.020 be listed a
ecord of is filed.	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th de	ay after the
ited	Signature of a member or authorized expresentative of a member	j
	Erika A. Mclagan	 :

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILE

360 Life Advisor LLC			11111 Q AV 11-1.2
Name of the Lin	nited Liability Company as it now (A Florida Limited Liability Comp	ippears on our records.)"" eny)	, could William
e Articles of Organization for this Limited orida document number L21000044600			and assigned
s amendment is submitted to amend the fo	Howing:		
If amending name, enter the new name		ny here:	
new name must be distinguishable and contain the	words "Limited Liability Company,	" the designation "LLC" or	the abbreviation "L.L.C."
er new principal offices address, if appl	icable:		
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er new mailing address, if applicable:			
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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	<u>Address</u>	Type of Action
MGR	Daniel McLoughlin	12392 Fillmore St	□Add
		Spring Hill, FL 34609	■Remove
MGR	Erika McLagan	12392 Fillmore St	
		Spring Hill, FL 34609	□Remove
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			
			Remove
			□Change

With Erika now being the sole member of 360 Life Advisor, her title will change	to MOR
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ve date, if other than the date of filing:	(optional)
ve date, if other than the date of filing: extive date is listed, the date must be specific and cannot be prior to date of filing or more the lif the date inserted in this block does not meet the applicable statutory filing requ	uirements, this date will not be lis
ent's effective date on the Department of State's records.	
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d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	cancion (b)
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June 9, 2025.	
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