hZ1 000057018

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COVER LETTER

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TO: Registration S Division of Co			
WORLDD	OOM HOLDINGS, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing	
	ondence concerning this matter	Ū	
	Shannon A. Shehorn		
	 ,	Name of Person	
	Tax & Financial Advisors	, Inc.	
		Firm/Company	
	2189 Logan Street		
		Address	
	Clearwater, FL 33765		
		City/State and Zip Code	
	accountant@tfa1120.com		
		to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Shannon A. Shehorn		727 442-1120 at ()	
Name of Person			: Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 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)
Mailing Addre Registration		Street Address: Registration Sec	ction
Division of Corporations		Division of Corp	
		The Centre of Ta	
Division of O P.O. Box 632 Tallahassee,	27	The Centre of T	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WORLDDOM HOLDING, LLC		
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited I Florida document number 121000057018	Liability Company were filed on $\frac{0}{2}$	2/01/2021 and assigned
his amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company l	nere:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STREET ADDRESS)		p res
	 <u>_</u>	P . 1
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	ROX)	5
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	-	js.
 If amending the registered agent and/or gent and/or the new registered office addre 	registered office address on our ess here:	records, enter the name of the new registe
Name of New Registered Agent:	Tax & Financial Advisors, Inc.	
New Registered Office Address:	2189 Logan Street	
	Enter Flo	orida street address
	Clearwater	, Florida ³³⁷⁶⁵
	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
MGR	First Steps Tampa, LLC	2403 W. Palm Drive	
		Unit 1	■Remove
		Tampa, FL 33629	□ Change
MGR	Nabilah Fountain	2403 W. Palm Drive	
		Unit 1	
		Tampa, FL 33629	-
			Change
			→ Z
			☐Remove
			57
<u> </u>	-		□Add
			Remove
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cord specifies a delayed I filed.	l effective date, but s	not an effective time, a	t 12:01 s.m. on the ea	rlier of: (b) The	90th day afte	er the
a August	19-	, 202]				
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	Signature of	a member or authorized	representative of a mem	ber		
_	,					

Filing Fee: \$25.00

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