

L21000/07269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

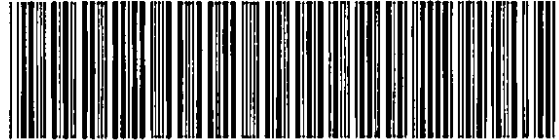
(Business Entity Name)

(Document Number)

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6/28/21
[Signature]

FILED
JUL 1 2021
JUL 1 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Two Girls and a mop 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:

Theresa Kabay
Name of Person

Two Girls and a mop llc
Firm/Company

20870 WE Hwy 315
Address

Ft. McCoy FL 32134
City/State and Zip Code

alosmom0114@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa Kabay at (352) 396-0850
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Two Girls and a Map LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 19th 2001 and assigned Florida document number L21000107269

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 "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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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

FILED
MAY 21 2001
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

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> | <u>Type of Action</u> |
|--------------|-----------------|----------------------------------|--|
| AMBR | Elizabeth Blow | 796 SW 135 th Terrace | <input type="checkbox"/> Add |
| | | Ocala, FL 34481 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Lorraine Rivera | 5431 NE 35 th St #138 | <input checked="" type="checkbox"/> Add |
| | | Silver Springs, FL 34488 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated May 19th 2021

Signature of a member or authorized representative of a member

Typed or printed name of signer

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