

K21 000 108727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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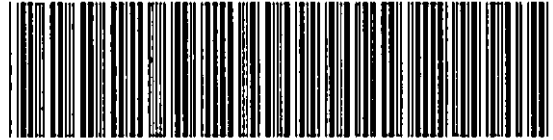
(Business Entity Name)

(Document Number)

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2021 DEC -6 AM 10:06  
SECRETARY OF STATE  
TALLAHASSEE, FL

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Team Free Infinity Taxes

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:

Sharon E. Atkins

Name of Person

Team Free Infinity Taxes

Firm/Company

21161 Palm Beach Lakes Blvd Ste 404

Address

West Palm Beach FL 33409

City/State and Zip Code

Sharon.E.Atkins@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon E. Atkins

Name of Person

at (407)

Area Code

891-2229

Daytime Telephone Number

Enclosed is a check for the 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 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

FILED

2021 DEC -6 AM 10: 06

TEAM FIVE Intensity Taxes LLC

SECRETARY OF STATE  
TALLAHASSEE, FL

(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 March 05<sup>th</sup> 21 and assigned  
Florida document number LD1000108727.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Sharonda Ethel Atkins, Xaviera MacHarty

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)

2161 Palm Beach Lakes Blvd  
West Palm Beach FL 33409  
Suite 404

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:

Sharonda Ethel Atkins

New Registered Office Address:

2161 Palm Beach Lakes Blvd. Ste 404

Enter Florida street address

W. P. B.

City

Florida

33409

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.

[Signature]  
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>	<u>Type of Action</u>
MGR	Andree B. Gordon	2161 Palm Beach Lakes Blvd Ste 404 W. P. B. FL 33409	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sharonda E. Atkins	2161 Palm Beach Lakes Blvd Ste 404 W. P. B. FL 33409	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	XANISSA MacLarty	2161 Palm Beach Lakes Blvd Ste 404 W. P. B. FL 33409	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Le Terrica Atkins	2161 Palm Beach Lakes Blvd Ste 404 W. P. B. FL 33409	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Is Changing from Manager to Authorized Member  
for Andreé Gordon and Tim Adding  
Shamonda E. Atkins and Xavier MacLarty

Andreé Gordon Passed Away on June 12<sup>th</sup> 2021  
He is no longer with us. So therefore I will  
have to remove him.

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TALLAHASSEE, FL

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E. Effective date, if other than the date of filing: March 15<sup>th</sup> 2021 (optional)

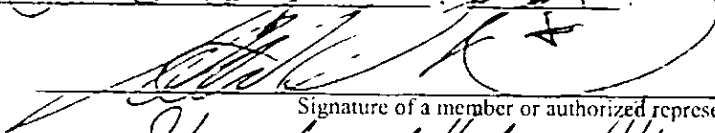
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated

June 1<sup>st</sup> 2021



Signature of a member or authorized representative of a member

Shamonda E. Atkins

Typed or printed name of signee