# L210001092

(R	equestor's Name)	
(Ad	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	·	

Office Use Only



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JUN 02 2021 I ALBRITTON

## Sunshine State Corporate Compliance Company

#### 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 6/1/2021		**WALK IN**
ENTITY NAME ACROS	S THE BOARD L.L.C.	
DOCUMENT NUMBER_		***************************************
	**PLEASE FILE THE ATTACHED AND RETURN**	
XXXX	Plain Copy	2.441 K B
	Certified Copy	
	Certificate of Status	
**£	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
<del></del>	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	of the time
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINAT	TON	
NUMBER OF CERTIFICAT	TES REQUESTED	
TOTAL OWED \$25.00	ACCOUNT #: I201600000	72 .
Please call Tina at th	e above number for any issues or concerns. Thank you	so much!

### COVER LETTER

TO: Registration So Division of Cor			
	e Board L.L.C.		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
	Kelsey Polasek		
		Name of Person	···
	ZenBusiness PBC		
		Firm/Company	
	5511 Parkerest Drive STE	207	
		Address	
	Austin, Texas, 78731		
		City/State and Zip Code	
	tultillment@zenbusiness.cc	om to be used for future annual report noti	fication)
For further information of	concerning this matter, please c		
Kelsey Polasek c/o Zenl	Business PBC	844 493-6249	
Name (	of Person	at ()	e 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		Street Address:	ation
Registration Division of C		Registration Se Division of Cor	
P.O. Box 632		The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Across The Board L.L.C.		
(Name of the Limited Liability Compa- (A Florida Limited I.	ny as it now appears on our records. Hability Company)	)
	were filed on 3/16/2021	and assigned
orida document number L21000109255		
and assigned Articles of Organization for this Limited Liability Company were filed on 3/16/2021 and assigned adversed agent and/or registered office address on our records, enter the name of the new ent and/or the new registered office address here:		
If amending name, enter the new name of the limited liabi	ility company here:	
new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L. C."
ter new principal offices address, if applicable:		
incipal office address MUST BE A STREET ADDRESS)		
		37 - 11
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE BOX)		
	ddress on our records, <u>enter t</u>	he name of the new register
mi and/or the new registered office address here.		
Name of New Registered Agent:		-
New Registered Office Address:		
	Enter Florida street address	
		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
AMBR	Edward Murphy	16400 collins ave Apt 1744	UAdd
		Sunny Isles, FL 33160	<b>≡</b> Remove
			(m. 80 × 172
			E]Add
			[TChange
<del></del>			□Add
			C!Remove
			⊕Change
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ffective date, if other than the an effective date is listed, the date mote: If the date inserted in this becament's effective date on the I	ist be specific and cannot dock does not meet the	e applicable statute	ling or more than 90 da	(optional) ys after filing.) Pursuant 10 60 us, this date will not be lis	5.0207 ( ted as t
record specifies a delayed effecti is filed.	ve date, but not an effi	ective time, at 12:0	)1 a.m. on the earlier	of: (b) The 90th day aft	er the
	202	İ			
ated		'			
ated May 28  /s/ Clifford					
	l Degel DDS		sentative of a member		

Filing Fee: \$25.00