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SECRETARY OF STATE
TALLAHASSEE EA

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

RESHAPE THE NATION, LC SUBJECT: 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: KENYA KIRKLAND Name of Person Firm/Company 3701 w. Santa Rosalia Drive#1030 Address LOS ANGELES, CA 90008 City/State and Zip Code kenyak@asteptofreedom.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JONAEE COFFEY 8364507 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & **■** \$60.00 Filing Fee, □ \$25.00 Filing Fee Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

	RESHAPE THE NATION, LC JUN -6 PM 5: 11.
(Name of the Limi	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) SECRETARY OF STATE TALLAHASSEE FI
The Articles of Organization for this Limited L	Liability Company were filed on 3/25/2022 and assigned
lorida document number L21000139577	·
his amendment is submitted to amend the foll	lowing:
a. If amending name, enter the new name o	of the limited liability company here:
Reshape the Nation, LLC	
he new name must be distinguishable and contain the v	words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	BOX)
 If amending the registered agent and/or registered office addressed 	registered office address on our records, <u>enter the name of the new registess here</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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 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	Address	Type of Action
			□Add
			□Remove
			□Change
		.	🗆 Add
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RECORDS CURRENTLY S	HOW "RESHAPE THE N	ATION, LC", BUT IT	SHOULD BE	
"RESHAPE THE NATION.	LLC"			
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this bedocument's effective date on the Date.	ock does not meet the appli	icable statutory filing	(optional) e than 90 days after filing.) requirements, this date w	Pursuant to 605.0207 (/ill not be listed as f
record specifies a delayed effective is filed.	e date, but not an effective	time, at 12:01 a.m. or	the earlier of: (b) The	90th day after the
Dated MAY 4	2022			
	Komzaku			
	Signature of a member or aut			