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| Special Instructions |         | -            |            |         |        |
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Office Use Only



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## **COVER LETTER**

| SATAN-A<br>SUBJECT:         | NDREA LYNN WHITE TALE                           | ENT AGENCY L.L.C.   |  |
|-----------------------------|---|---|--|
|                             | Name of Limi                                    | ited Liability Company  |  |
| The enclosed Articles of    | Amendment and fee(s) are sub-                   | mitted for filing.  |  |
| Please return all correspo  | ondence concerning this matter                  | to the following:   |  |
|                             | Cheyenne Moseley                                |   |  |
|                             | <u> </u>  | Name of Person  |  |
|                             | Legalzoom.com, Inc.                             |   |  |
|                             |   | Firm/Сотралу  |  |
|                             | 101 N Brand Blvd 11th Fl                        |   |  |
|                             |   | Address   | <del></del>  |
|                             | Glendale, CA 91203                              |   |  |
|                             | andreawhite946@yahoo.com                        |   | <del></del>  |
|                             | E-mail address: (t                              | to be used for future annual report notific                         | cation)  |
| For further information of  | oncerning this matter, please ca                | ill:  |  |
| Cheyenne Moseley            |   | 800 773-0888  |  |
| Name o                      | f Person  | Area Code Daytime   | Telephone Number   |
| Enclosed is a check for the | he following amount:                            |   |  |
| \$25.00 Filing Fee          | ☐ \$30.00 Filing Fee &<br>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

TO:

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

FILED

2021 OCT 29 AM 2: 30

SATAN-ANDREA LYNN WHITE TALENT AGENCY L.L.C.

SECRETARY OF STATE

(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    | 04/06/2021                | and assigned             |
|---|------------------|---------------------------|--------------------------|
| Florida document number L21000159049  |                  |                           |                          |
| This amendment is submitted to amend the following:   |                  |                           |                          |
| A. If amending name, enter the new name of the limited liabi  | ility company    | here:                     |                          |
| The new name must be distinguishable and contain the words "Limited Liabil  | ity Company," th | e designation "LLC" or t  | he abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |                  |                           |                          |
| (Principal office address MUST BE A STREET ADDRESS)   |                  |                           |                          |
|   |                  |                           | <del></del>              |
| Enter new mailing address, if applicable:   |                  |                           |                          |
| (Mailing address MAY BE A POST OFFICE BOX)  |                  |                           |                          |
|   | <del></del>      | <u></u> .                 |                          |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here |                  | on our records, <u>en</u> | ter the name of the new  |
| Name of New Registered Agent:   |                  |                           |                          |
| New Registered Office Address:  |                  |                           |                          |
|   | Enter F          | lorida street address     | -                        |
|   |                  | , Florida                 | 1                        |
|   | City             |                           | 7.ip 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(5) 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>                                   | Type of Action |
|--------------|-----------------------|--|----------------|
| AMBR         | WHITE, SATAN ANDREA L |  |                |
|              |                       | 1590 NE 161ST ST.<br>NORTH MIAMI BEACH, FL 33162 | B Remove       |
|              |                       |  | ☐ Change       |
| AMBR         | Andrea Lynn White     | 1590 NE 161ST ST.<br>NORTH MIAMI BEACH, FL 33162 |                |
|              |                       |  | □ Remove       |
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| Effective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day  dote: If the date inserted in this block does not meet the applicable statutory filing requiremen  focument's effective date on the Department of State's records.  The 90th day after the record is filed.  The 90th day after the record is filed. |   |
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| The 90th day after the record is filed.   | ( <b>optional)</b> As after filing.) Pursuant to 605.020° ts, this date will not be listed as |
| ated <u>April 116, 302/</u>   | :01 a.m. on the earlier o   |
| William Trans 1 1 1   |   |
| Signature of a member of authorized representative of a member  |   |
| Andrea Lynn White   |   |

Page 3 of 3

Filing Fee: \$25.00