L21000165633

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31 MAY -3 PM 5: 19

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TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

HeartStart Training and Staffing, LLC 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: Stephanie Hayes Robinson Name of Person HeartStart Training and Staffing, LLC Firm/Company 15201 Plantation Oaks Drive, Apt. 7 Address Tampa, FL 33647 City/State and Zip Code heartstarttrainingllc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Stephanie Hayes Robinson Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee, □ \$25.00 Filing Fee ■ \$30.00 Filing Fee & □ \$55,00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HeartStart Training and Staffing, LLC

21 MAY -3 PH 5: 19

(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 Compa	any were filed on April 09.	2020 and assigned
Florida document number L21000165633		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If we also the second control of the seco		Calles were more than
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our records	s, enter the hame of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida stre	eet address
		. Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent and a		
provisions of all statutes relative to the proper and complaceept the obligations of my position as registered agent		
being filed to merely reflect a change in the registered off	• •	-
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 = M $AMBR = M$	Manager Authorized Member			PHTSpe of Action
<u>Title</u>	<u>Name</u>	Address	21 HAY -3	PHTSpe of Action
MGR	Rodney D Robinson	15201 Plantation Oaks Drive, Ap		□Add
		Tampa, FL 33647		= Remove
				□Change
MGR	Stephanie Hayes Robinson	15201 Plantation Oaks Drive, Apr	17	■Add
		Tampa, FL 33647		□Remove
				□Change
				□ Add
				□Remove
				□Change
				□Add
				□Remove
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				□Remove
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If amending any other information, enter change(s) h			1	Alexander (
				21 MAY -3	PH 5: 1
					
	.				
				<u> </u>	
					
					
					
					
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be provided. If the date inserted in this block does not meet the approximent's effective date on the Department of State's record	plicable statute	ing or more than 90 c		ing.) Pursuant to	
e record specifies a delayed effective date, but not an effectived is filed.	ve time, at 12:0	1 a.m. on the earli	er of: (b)	The 90th day	after the
Dated April 29 2021 Signature of a member or as	TUS Lauthorized repres	oluly entative of a membe	r		_
Stephanic Hayes Robinson	() ·				
•	rinted name of s	ivnee			_

THE P. STRAG