L21000193282

·		
(Re	questor's Name)
(Ad	dress)	
·	·	
(Ad	dress)	
_		
(Cit	y/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	ime)
(Do	cument Number	r)
(,
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
		1.155/11
		6135/31

Office Use Only



700366902317

05/24/21--01084--007 *+25.00



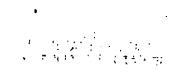
COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	ECT: SPORED COW LIVING LLC Name of Limited Liability Company
The er	nclosed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	RACHEL SAWYER Name of Person
	SACRED COWNING LLC Firm/Company LO76 LONG- MEADOW CIRCLE SOLITH Address JACKSONNILLE FL Address Address MEALTREPISHEE GMAN, COM E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
P	ACHELSAWYER at (904) 444. 0535 Area Code Daytime Telephone Number
Enclos	sed is a check for the following amount:
⊵ 5.	25.00 Filing Fee Solution Solu

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



21 MAY 24 PH 2: 57

(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) I Liability Company)			
The Articles of Organization for this Limited Liability Companifornida document number <u>U21000193282</u> .	y were filed on 4.26.21 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "L.L.C."			
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	JACKSONNILE FL 32244			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	LOTIO LONG MEADOW GROLESOUTH JACKSONVILLE, FL 32244			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered			
Name of New Registered Agent:	HEL SAWYER			
New Registered Office Address: 6761	6761 LONG MEADOW CIPCLE SOUTH Enter Florida street address			
SACK	City Special Sary			
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>			
I hereby accept the appointment as registered agent and ag	ree to act in this capacity. I further agree to comply with the			

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.

MY OWN COMPANY TO CHANGE CHANGE PLANT OF CHANGE Agent OF CHANGE CHANGE CHANGE PARTY OF CHANGE AGENT OF CHANGE OF THE PARTY OF THE P

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: A Company MGR = Manager AMBR = Authorized Member 21 MAY 24 PM 2: 57 <u>Title</u> Address Type of Action <u>Name</u> □Remove ☐ Change □ Change \square Add □Remove □Change

D. If amending a	ny other information, c	enter change(s) h	ere: (Attach aḍḍi)	ional sheets, if nec	èssary.)
\mathcal{P}	LEASE	TUST	ADD A	M2424 12942	NE
	A5	MA	NACET	3 to n	14
	0000 7	311/210	755	ASAF	> 1
	DIEV	FEL	1ND f	+ 51N)	(H) F
	MONA H	100	125	NORK	
	1) NTI	THE	PANK	OPEUE	
	My Biz	Acmu	XKT 4-5	THEY T	REFUSE
70.4	2CAUSE	ITS	TAV 5	1/N/0 N2.	Ell
10	JT EVAN	OF.	NX N	AMEI)]
- \ '	T	<u> </u>			2,00
		LA	FI		
)		
		<u> </u>	···		
					
					
	<u> </u>				
(If an effective date Note: If the dat		eific and cannot be present the app	olicable statutory tili		onal) filing.) Pursuant to 605.0207 (3) s date will not be listed as the
f the record specifie ecord is filed.	s a delayed effective date,	but not an effectiv	e time, at 12:01 a.m	. on the earlier of: (b	The 90th day after the
Dated	AY 19,20 Rauh Signain	Z) . ure of a member or a	uthorized representation	e of a member	
	BACHEL	Typed or pr	TER inted name of signee	MAN	ACER

Filing Fee: \$25.00