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COVER LETTER

TO:				•	
01:B18		Solutions LLC			
SUBJE	Name of Limited Liability Company				
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		Joshua Lefebvre			
Division of Corporations LefeWare Solutions LLC 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: Joshua Lefebvre Name of Person LefeWare Solutions LLC Firm/Company 7901 4th ST N STE 300 Address ST PETERSBURG FL 33702 City/State and Zip Code josh.lefebvre@lefewaresolutions.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joshua Lefebvre Name of Person T27 Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)					
		LefeWare Solutions LLC			
			Firm/Company		
		7901 4th ST N STE 300			
			Address		
		ST PETERSBURG FL 33	702		
SUBJE The end Please r For furt Joshua		City/State and Zip Code			
		*		NI-day	
For furt	her information c		·	ncanon)	
Joshua			at ()		
	Name o	f Person	Area Code Daytime	e Telephone Number	
Enclose	d is a check for th	ne following amount:			
□ \$ 25	.00 Filing Fee		Certified Copy	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

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**

FILED

LefeWare Solutions LLC

2025 MAR 19 PM 4: 40

pany as it now appears on our records d Liability Company)	TALLAHASSEE, FLORIE
ny were filed on 05/03/2021	and assigned
ability company here:	
ability Company," the designation "LLC"	or the abbreviation "L.L.C."
7901 4th ST N STE 300 ST PE	TERSBURG FL 33702
7901 4th ST N STE 300 ST PE	TERSBURG FL 33702
e address on our records, <u>enter</u> t	the name of the new registered
Enter Florida street address	
, Flo	rida
City	Zip Code
	ability company here: ability Company," the designation "LLC" 7901 4th ST N STE 300 ST PE 7901 4th ST N STE 300 ST PE e address on our records, enter the street address.

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>	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
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ffecti	ive date, if other than the date of filing: (optional)
	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
ocum	ent's effective date on the Department of State's records.
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
ated	
	Jean Lefobe
	Signature of a member or authorized representative of a member
	Joshua Lefebvre

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Filing Fee: \$25.00