## 121000216779

(Rec	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	





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## **COVER LETTER**

O: Registration So Division of Cor			
Callahan R	ELLC		
<u></u>	Name of Lim	ited Liability Company	<del></del>
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
lease return all correspo	ondence concerning this matter	to the following:	
	Laurie Callahan		
		Name of Person	<del></del>
		Firm/Company	<del>,</del>
	6474 E Lowden St		
	<del></del>	Address	
	Inverness, FL 34452		
	laurie9653@yahoo.com	City/State and Zip Code	
Confirmation in Companion of		to be used for future annual report notif	fication)
cor turtner information e Laurie Callahan	oncerning this matter, please ca	352 464-0743	
Name o	f Person	at () Area Code Daytimo	e Telephone Number
Enclosed is a check for the	he following amount:		
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & 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

TO:

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

Callahan RE LLC	
(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 $\frac{05/10/2021}{1.21000216779}$ .	and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
aurie Callahan LLC	
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	<u>-</u>
Inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the n	ame of the new regis
gent and/or the new registered office address here:	:
	rs.c
Name of New Registered Agent:	·
Name of their registered rigent.	- : : -
New Registered Office Address:	
Enter Florida street address	<u> 5</u> .
, 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>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			☐ Change
			□Add
			□Remove
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=			
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			□Change

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ffective date, if other than the an effective date is listed, the date mote: If the date inserted in this locument's effective date on the	ust be specific and cannot be prior to date of block does not meet the applicable state	(optional) Tiling or more than 90 days after filing.) Put utory filing requirements, this date wil	irsuant to 605.020 Il not be listed as
record specifies a delayed effect	ive date, but not an effective time, at 12	2:01 a.m. on the earlier of: (b) The 9	0th day after the
l is filed.	. 2021		
l is filed.  May 19  ated	2021  Laure Caucha  Signature of a member or authorized rep	Foundative of a member	