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SECRETION OF BUILDING
TALLAHASSEE, FL

2022 JUN 1 4 AM 11:5

## **COVER LETTER**

**Registration Section** 

TO:

Division of Co	rporations					
Hive Five	Legal Services, LLC	Limited Liability Comment				
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sul	Name of Limited Liability Company  at and fee(s) are submitted for filing.  Address  alm Beach FL 33409  City/State and Zip Code  21@yahoo.com  E-mail address: (to be used for future annual report notification)  his matter, please call:  at (				
Please return all correspo	ondence concerning this matter	to the following:				
	Christina Zanzig					
		Name of Person	<del></del>			
	Hive Five Legal Services					
		Firm/Company	<del></del>			
	11101 Glenmoor Drive					
		Address				
	West Palm Beach, FL 334	09				
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code				
	czanzig421@yahoo.com					
		•	tification)			
For further information c	oncerning this matter, please c	all:				
Christina Zanzig						
Name o	f Person	Area Code Daytir	ne Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy			
Mailing Addres Registration S	Section	Registration Se				
Division of Corporations P.O. Box 6327		Division of Co The Centre of	-			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Hive Five Legal Services, LLC

2022 JUN 14 AM 11:50

(Name of the Limited Liability Company as it now appears on our records) EURE 1711 TALLA LIA COST TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on 06/14/2021 and assigned Florida document number L21000275887 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Dark Horse Legal Services, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida 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(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

Title	<u>Name</u>	<u>Address</u>	Type of Action
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			□Remove
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ffective date, if other than the date of filing:	06/02/2022		(op	itional)		
an effective date is listed, the date must be specific and colore: If the date inserted in this block does not me	annot be prior to	date of filing or m le statutory filin	ore than 90 days af	ter filing.) Pursu	iant to 605. ot be liste	.0207 ( ed as t
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Filing Fee: \$25.00