

L21000350848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

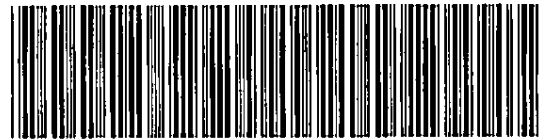
(Business Entity Name)

(Document Number)

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JESSICA L. HARRIS

8/21/21

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: KeepingCalm, 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:

Karen Rainford  
Name of Person

Firm/Company

P.O. Box 541432  
Address

Greenacres, FL 33454  
City/State and Zip Code

Telemapex4@outlook.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Karen Rainford at 561 908/846  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

**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**

Keeping Calm, 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 8/4/2021 and assigned  
Florida document number L2100350848

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

*(I want my company name  
to look like this with the  
space.)*

Keeping Calm, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

635 SW 3rd St.  
Belle Glade, FL 33430

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 541432  
Greenacres, FL 33454

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

City, Florida 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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	Bloomfield, Tenika P.	7403 Pinedale Drive	<input type="checkbox"/> Add
		Boynton Beach, Fl	<input checked="" type="checkbox"/> Remove
		33436	<input type="checkbox"/> Change
	Powell, Lenika V.	10976 SW Pacini Way	<input type="checkbox"/> Add
		Port Saint Lucie, Fl	<input checked="" type="checkbox"/> Remove
		34987	<input type="checkbox"/> Change
	Rainford, Matthew I.	10 Photina CT,	<input type="checkbox"/> Add
		Winter Springs, Fl	<input checked="" type="checkbox"/> Remove
		32708	<input type="checkbox"/> Change
	Rainford, Pebbles K.	6311 Pine Stead Dr.	<input type="checkbox"/> Add
		Apt. 525, Lake	<input checked="" type="checkbox"/> Remove
		Worth, Fl 33463	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I am amending this article because:

① I want to put a space between Keeping and calm and LLC. Like this --- Keeping calm, LLC.

② I would like to remove my four children.

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STATE

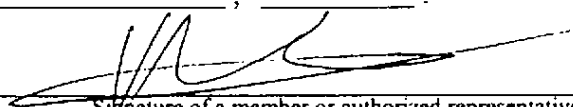
E. Effective date, if other than the date of filing: 8/5/2021 (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated \_\_\_\_\_,

  
Signature of a member or authorized representative of a member

Karen V. Rainford

Typed or printed name of signee

8/5/2021