## 121 CCC 352235

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO:

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	ited Liability Company			
Amendment and fee(s) are sub	mitted for filing.			
ondence concerning this matter	to the following:			
Jeremy D. Bailie				
	Name of Person			
Weber, Crabb & Wein, P.A	۸.			
	Firm/Company	sec	2021	
5453 Central Avenue		EL A	SEP .	Í
	Address			
St. Petersburg, Florida 337	10	0 0 0 0	PH	1
	City/State and Zip Code	FA	3: O	
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	727 828-9919			
of Person		: Telephone Number	-	
he following amount:				
■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy + tadditional copy is enclosed)	Certificate of St Certified Copy	atus &	
Section Corporations 27	Division of Cor The Centre of T	porations allahassee		
	Amendment and fee(s) are sub- ondence concerning this matter  Jeremy D. Bailie  Weber, Crabb & Wein, P.A  5453 Central Avenue  St. Petersburg, Florida 337  jeremy,bailie@webercrabb.  E-mail address: Ceoncerning this matter, please concerning this matter, please concerning this matter.	Name of Limited Liability Company  Tamendment and fee(s) are submitted for filing.  Independence concerning this matter to the following:  Jeremy D. Bailie  Name of Person  Weber, Crabb & Wein, P.A.  Firm/Company  5-453 Central Avenue  Address  St. Petersburg, Florida 33710  City/State and Zip Code  jeremy.bailie@webererabb.com  E-mail address: to be used for future annual report notification cerning this matter, please call:  at (	Name of Limited Liability Company  Amendment and feets) are submitted for filing.  Ondence concerning this matter to the following:    Jeremy D. Bailie	Name of Limited Liability Company  Amendment and fee(s) are submitted for filing.  Indicated Concerning this matter to the following:    Jeremy D. Bailie

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our records.) Liability Company)	
were filed on August 3, 2021	and assigned
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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>	Type of Action
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