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☐ PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
100	Smess Emily Har	no,
(Do	cument Number)	_
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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#P 27/21 中心是一种的一种的人

2-14-22 TAS

COVER LETTER

SUBJECT:		2 142 132 2	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sean Petersen		
		Name of Person	•
	Goosehead Insurance - Sea	an Petersen, LLC	
		Firm/Company	
	233 NORTH TENNESSEI	E STREET	
		Address	
	Lakeland, Florida 33801		
		City/State and Zip Code	
	sean.petersen@goosehead.c	com	
	E-mail address: (to be used for future annual report not	ification)
or further information of	concerning this matter, please co	all:	
Sean Petersen		813 770-9014	
Name o	of Person		ne Telephone Number
Enclosed is a check for t	he following amount:		
Diengacu is a circul ful f	iic ionowing annum.		
□ \$25,00 Filing Fec	S30,00 Filing Fee & Certificate of Status	(3) \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (#dditional copy is enclosed

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Taliahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FH 1:53

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOJERO PRINCES

Goosehead Insurance - Sean Petersen, LLC		
(Name of the Limited Liability C (A Florida Li	company as it now appears on our mited Liability Company)	Lecolqr)
he Articles of Organization for this Limited Liability Com	npany were filed on 1/13/2022	and assigned
lorida document number L21000355037		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	d Jiability company here:	
Petersen Insurance Solutions, LLC		
he new name must be distinguishable and contain the words "Limited	I Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u> </u>	
	 -	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	ffice address on our records. Enter Florida stree	
	Citv	, Florida Zip Code
New Registered Agent's Signature, if changing Registered A	.gent:	•
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacept the obligations of my position as registered agent being filed to merely reflect a change in the registered occumpany has been notified in writing of this change.	plete performance of my du it as provided for in Chapte	ties, and I am familiar with and r 605. F.S. Or, if this document is
ī	f Changing Registered Agent, Slov	nature of Now 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 = \frac{1}{2} AMBR = \frac{1}{2}	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□ Add
			CRemove
			☐ Change
			□Add
			🗀 Rеточе
			□Add
			ПRетноve
			□Change
			C]Add
			□Remove
			□Change
	·		∐Add
			□Remove

☐ Change

ffective date, if other than the date of filing: (optional) (opt	amending any other intorm	nation, enter change(s) here: (Attach additional sheets, if necessary.)	
Ffective date, if other than the date of filing:			
Ffective date, if other than the date of filing:			
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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 605.026 ofte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a becument's effective date on the Department of State's records. The 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 list filed. The 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 list filed.			
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ented		tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 9	Oth day after the
Signature of a member or authorized representative of a member	January 21	2022	
Signature of a member or authorized representative of a member			
		ws/.	

Filing Fee: \$25.00