# 00369

(Requestor's Name)	
(Address)	400376179
(Address)	400070170
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	11/22/21010030
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	
	A Marchines
Office Use Only	1/ 1/1/00 1 ,01 5.



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ALBRITTON

## CAPITAL CONNECTION, INC.

447 E. Virginia Street, Suite 1 — Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Act of loc. File  LTD Partnership File  Foreign Corp. File  L.C. File  Ficinious Name File  Trade/Service Mark  Merger File  Art. of Amend. File  RA Resignation  Dissolution / Withdraw al  Annual Report / Reinstatement  Cert. Copy  Phus Copy  Certificate of Status  Certificate of Status  Certificate of Fictitious Name  Corp Record Search  Fictious Search  Fictious Search  Fictious Search  Fictious Gover Search  Neichele Search  Driving Record  Requested by:  Requested by:  Name  Date  Time  UCC 11 Search			<del></del>	
LETD Partnership File Foreign Corp. File L.C. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Driving Record Requested by:  Name Date Time UCC 11 Search UCC 11 Retrieval UCC 11 Retrieval UCC 11 Retrieval UCC 11 Retrieval	LINKS2SUCCE	SS, LLC		
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Trade/Service Mark  Merger File  Art. of Amend. File  RA Resignation  Dissolution / Withdrawal  Annual Report / Reinstatement  Cert. Copy  Photo Copy  Certificate of Good Standing  Certificate of Status  Certificate of Fictitious Name  Corp Record Search  Fictious Search  Fictitious Search  Fictitious Search  Driving Record  Requested by:  Name  Date  Time  UCC 11 Search  UCC 11 Retrieval  UCC 11 Retrieval  UCC 11 Retrieval  UCC 11 Retrieval				İ
Merger File				Fictitious Name File
Art. of Amend. File				Trade/Service Mark
RA Resignation				Merger File
Dissolution / Withdrawal				Art. of Amend. File
Annual Report / Reinstatement   Cert. Copy   Photo Copy   Photo Copy   Certificate of Good Standing   Certificate of Status   Certificate of Fictitious Name   Corp Record Search   Officer Search   Fictitious Search   Fictitious Search   Prictitious Owner Search   Vehicle Search   Driving Record   Priving Record   UCC 1 or 3 File   UCC 11 Search   UCC 11 Search   UCC 11 Search   UCC 11 Retrieval   UCC 11 Ret				RA Resignation
Cert. Copy				Dissolution / Withdrawal
Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record Requested by: UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval Walk-In Will Pick Up Courier Certificate of Good Standing Certificate of Fictitious Name  Lord Record Lord Retrieval Lord Retrie				Annual Report / Reinstatement
Certificate of Good Standing				Cert. Copy
Certificate of Status				Photo Copy
Certificate of Fictitious Name				Certificate of Good Standing
Corp Record Search				Certificate of Status
Officer Search				Certificate of Fictitious Name
Officer Search				Corp Record Search
Fictitious Owner Search				}
Vehicle Search				Fictitious Search
Vehicle Search	Signature			Fictitious Owner Search
Requested by:        UCC 1 or 3 File	Signature			Vehicle Search
Name         Date         Time         UCC 11 Search	<del></del>	<del></del>		Driving Record
Name         Date         Time         UCC 11 Search	Requested by:			
Name         Date         Time         UCC     Retrieval	<del></del>			
Walk-In Will Pick Up Courier	Name	Date	Time	
			Up	

### **COVER LETTER**

TO: Registration Section

Div	ision of Corp	porations		
	LINKS2SU	CCESS, LLC		
SUBJECT:		Name of Lim	ited Liability Company	<del></del>
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		STESZEWSKI, JONATIL	AN, ESQ.	
			Name of Person	
		Steszewski Medina, P.A.		
			Firm/Company	<del></del>
		15100 NW 67TH AVE., S	UITE 200	
			Address	<del></del>
		MIAMI LAKES, FL 33014	4	
			City/State and Zip Code	
		jonathan@steszewskimedin	a.com to be used for future annual report not	ification)
For further in	iformation co	incerning this matter, please ca		and the same of th
		morning and marker, promo en	<b></b> .	
	Name of	Person	at ()	ne Telephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 F	iling 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)
Reg	ling Address gistration S vision of Co		Street Address: Registration Se Division of Co	
P.O	. Box 6327	1	The Centre of T	Tallahassee
Lal	lahassee, F	L 32314	2415 N. Monro	c Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LINKS2SUCCESS, LLC		
(Name of the Limited Liah) (A Flori	ility Company as it now appears on our records da Limited Liability Company)	.;)
The Articles of Organization for this Limited Liability	Company were filed on 08/17/2021	and assigned
Florida document number L21000369561	· ·	[8]
This amendment is submitted to amend the following:		and assigned
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited 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 ADD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or register agent and/or the new registered office address here:	ed office address on our records, <u>enter t</u> :	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<del></del> -		rida
	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 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>	Address	Type of Action
AMBR	Paul Taxin	3425 DELANEY DR., APT. 213	
		MELBOURNE, FL 32934	Remove
			☐ Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			□Add
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		<del>.</del>	□Change
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lf an eff <u>Note:</u>	ve date, if other than the date of filing:
e recor	d 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 ed.
Dated	November 19 2021
	(6)

Filing Fee: \$25.00

Typed or printed name of signee