## L21000371933

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Orty/Otate/Zip/) Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE JAN 1 1 2022
JAN 1 2022

Office Use Only



100378302121

13:27 21--01031--713 \*\*23.60



## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
	d Free Agent LLC		
SUBJECT:	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:	
	Jonathan Odjo		
		Name of Person	<del></del>
	Unrestricted Free Agent L	LC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	<del></del>
	602 Timberlane Circle		
	<del></del>	Address	
	Greenacres, FL 33463		
	Address  Greenaeres, FL 33463  City/State and Zip Code  Unrestrictedfapod@gmail.com  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:		
	· — –		attination)
For further information of			(Mileanon)
Jonathan Odjo		314 665-4434 at ()	
Name o	of Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for t	he 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 Addre		Street Address:	
Registration : Division of C		Registration S Division of C	
P.O. Box 632	27	The Centre of	f Tallahassee
Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 DEC 27 AM 11: 47

SECRETARY OF STATE Unrestricted Free Agent LLC (Name of the Limited Liability Company as it now appears on our records) Lability SSEE. [1] (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on August 19th, 2021 and assigned Florida document number 1.21000371933 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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

## 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 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	Jonathan Odjo	602 timberlane circle, greenacres FL, 33463	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
		<del></del>	□Add
			□Remove
			Ti Change

for authorized persons.						
		-			-	-
				· · · · · · · · · · · · · · · · · · ·		
			<del></del>	- <del></del>		_
			_			
		<del></del>				_
		,				
	<del></del>	1		<del></del>		_
<del></del>		· · · ·				
						_
					···	_
<del></del>						
					-	
ective date, if other than the da n effective date is listed, the date must be te: If the date inserted in this block nument's effective date on the Depa	specific and canno does not meet th	ot be prior to date ne applicable s	of filing or more tatutory filing re	than 90 days after	filing.) Pursuant to (	505.020 isted as
ecord specifies a delayed effective distilled.	ite, but not an ef	fective time, a	. 12:01 a m. on t	he earlier of: (b'	) The 90th day a	fter the
December 8th	202	21				
ted						

Filing Fee: \$25.00