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(Requestor's Name)
(Address)
(Address) (Address) (City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO:	Registration Section Division of Corpor			
SUBJEA	ct:Reg	UH WHA Name of Limit	An Edge LLC	
The enci	losed Articles of Am	endment and fee(s) are subm	nitted for filing.	
Please n	eturn all corresponde	nce concerning this matter to	o the following:	
		<u>Jessi</u> C	Name of Person	
			Firm/Company	
		500 7	Trinity Lane	6113
		St	Petersburg F	i 33716 Alegmail.com
		\ess. \	City/State and Zip Code NU STIC AND NEA o be used for future annual report notif	Alegmail.com
For furt	ther information cons	cerning this matter, please ca		
	Name of Po	larings	at (774) 779 (o Area Code Daytima	409 Telephone Number
Enclose	ed is a check for the	following amount:		
	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address: Registration So Division of Co		Street Address: Registration See Division of Cor	porations
	P.O. Box 6327 Tallahassee, FI	. 32314	The Centre of T 2415 N. Monro	'allahassee e Street, Suite 810
		- - ·		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Reputy WHA	An Edge	116
(Name of the Limited Lishility Company (A Florida Limited Lish	es it now appears on our rec dity Company)	ords.)
The Articles of Organization for this Limited Liability Company we Florida document number	are filed on 08 24	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability The new name must be distinguishable and comain the world. Limited Liability		LLC" or the abbreviation "L.L.C."
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 ad agent and/or the new registered office address here: Name of New Registered Agent:	dress on our records, <u>e</u>	nter the name of the new registered
New Registered Office Address:	Enter Florida street a	ddress
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	verformance of my aune vavided for in Chapter (505, F.S. Or, if this document is

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
			□Add
			Remove
			Change
			
			Change
			DAdd
			□Remove
			Change
			□Add
			□Remove
			Change
			DAdd
			Remove
			Change
			□Add
			Remove
			Change

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	e date, if other than the date of filing: Ob 20 20 (optional) (optional) (ive 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 60 (optional) (ive 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 60 (optional)	
fective m effect	e date, if other than the date of filing: (optionial)	05.02
ate It	tive date is listed, the date must be specific and cannot be just to take it thing a little date must be specific and cannot be just to take it thing a little requirements, this date will not be limber in seffective date on the Department of State's records.	SUERU -
record :	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at d.	ter ti
ated_	August 28 . 2021.	
	1 Arrice arrise	
	Storeture of a member of authorized representative of a member	

Filing Fee: \$25.00