Division of Corporations

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H210003457353)))



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To:

Division of Corporations

Tax Number : (850)617-6383

Prom:

Account Name : LEGALZOOM.COM INC. Account Number : 120010000062 Prone : (323) 962-8600 Fax Number : (323)962-3689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GROWING SOFLO LLC** 

Certificate of Status Certified Copy 1 05 Page Count \$55.00 Estimated Charge

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Help

## **COVER LETTER**

	egistration Sec ivision of Corp							
GROWING SOFLO LLC								
SUBJECT: Name of Limited Liability Company								
The enclos	ed Articles of .	Amendment and fee(s) are subm	nitted for filing.					
Please retu	m all correspo	ndence concerning this matter to	o the following:					
		Cheyenne Moseley						
	Name of Person							
	Legalzoom.com. Inc.							
Firm/Company								
	101 N Brand Blvd 11th Fl							
	Address							
		Glendale, CA 91203						
	City/State and Zip Code							
	triceardi@icloud.com  L-mail address: (to be used for future annual report notification)							
		L-mail address: (to	be used for future annual	report notification	1)			
For further	information co	oncerning this matter, please cal	1:					
Cheyenne	Moseley			3-0888				
Name of Person			at () Aren Code	Daytime Telep	ohone Number			
Enclosed is	s a check for th	e following amount:						
□ \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enc		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GROWING SOFLO ELC		
(Name of the Limited Lia (A Flo	bllity Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number 1.21000378700	y Company were filed on 08/24/2021	and assigned
This amendment is submitted to amend the following	r.	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "l	Limited 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 AD	DDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		er-the name of the ne
Name of New Registered Agent:		7-6 F-6
New Registered Office Address:		
	Enter Florida street address , Florida	1 10: 1
	Cur	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

Page: 4 of 6

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
MGR	RICCARDI, ANTHONY V		
		16440 NE 30TH AVE. NORTH MIAMI BEACH, FL 33160	■ Remove
			Change
AMBR	RICCARDI, ANTHONY	<del></del>	Add
			Remove
		16440 NE 30TH AVE. NORTH MIAMI BEACH, FL 33160	☐ Change
	<del></del>		
			Remove
			Change
			D Add
			Remove
			Change
			Add
			☐ Remove
			☐ Change
	<del></del>		Add
			Remove
			☐ Change

From: Sylvia Pauli

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00