L21000404415

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

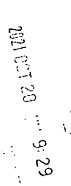
Office Use Only

A. RIVERS



400375044184

10/20/21--01011--024 **25.00



COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT:	Name of Lim	ited Liability Company	11
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jewnae	Pearson Name of Person	
	Teagre Cor	Shuction Firm/Company	
	2.S. Lina	V Ferr	
	Inveness	A 34450 City/State and Zip Code	
	Flague (Mail address: (Sto be used for Juture annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
Schert K	agueI	a, 467, 202-1	429+
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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 Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Liability Company as it now appears on our records.) Florida Limited Liability Company)	
ility Company were filed on Sept 14th 2	and assigned
ing:	
ne limited liability company here:	
s "Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
le:	
ADDRESS)	
<u></u>	
interest office address on our records enter the nex	no of the new notices.
nere:	2021 OCT
	OCT LO
	.
Enter Florida street address	9
	ility Company were filed on Sept 14th 2 4415 ing: ing

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>	Name	Address	Type of Action
lbr.	Leith Fischer	3250 Holgraw Tr Somento II 32776	Z XAdd
\smile			□Remove
			□Change
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	ig any other information, enter change(s) here: (Attach additional sheets, if necessary.) The fischer of perations
W Su	U other information will be Staying the one. Addition of officer
an effective of the	ate, if other than the date of filing: 10 12 2 (optional) 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 605.02 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed effective date on the Department of State's records.
record spec is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	Signature of a member or authorized representative of a member
	Jeanac Pearson, vice Prosident Typed or printed name of signee