

k21000422062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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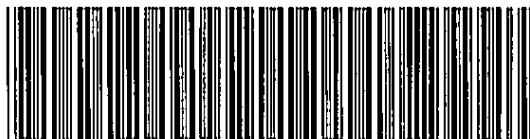
(Business Entity Name)

(Document Number)

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2022 AUG 19 PM 1:24

Msans
11/8/22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Micaela N Geathers LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Micaela N. Geathers
Name of Person

Firm/Company

3469 W Boynton Beach Blvd Suite 2 #1080
Address

Boynton Beach, FL 33436
City/State and Zip Code

micaelageathers@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Micaela Geathers at (561) 577-2648
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

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Micaela N Grathers LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 9/24/2021 and assigned Florida document number L21000422062

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Micaela's Goods, LLC
The new name must be distinguishable and contain the words "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 ADDRESS)

3469 W Boynton Beach Blvd
Suite 2 PMB 1080
Boynton Beach, FL 33436

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3469 W Boynton Beach Blvd
Suite 2 PMB 1080
Boynton Beach, FL 33436

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

Florida

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated August 15th, 2022

Michael H. Gearty

Signature of a member or authorized representative of a member

M. caela N. Geathers

Typed or printed name of signee