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### FLORIDA DEPARTMENT OF STATE Division of Corporations

#### RECEIVED

2022 FEB -7 PH 1:41

SECRETARY OF STATE TALLAHASSEE, FL

January 21, 2022

KYLE VAILLANCOURT 201 44TH ST. W BRADENTON, FL 34209

SUBJECT: ETERNAL HOLDING LLC

Ref. Number: L21000512029

We have received your document for ETERNAL HOLDING LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers Regulatory Specialist II

Resoived

Letter Number: 422A00001627

#### **COVER LETTER**

TO:

Tallahassee, FL 32314

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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2022 FEB -7 AM 11: 41 ed Liability Company as it now appears on in records.)
(A Florida Limited Liability Company)

[A L. 123] The Articles of Organization for this Limited Liability Company were filed on December 3/d, 2 and assigned Florida document number \_ L21000 512029 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Eternal Holdings LLC

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 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>	Name	Address	Type of Action
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		Signature of a m	ember or authorize	ed representative of a	member	<del></del>
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Filing Fee: \$25.00