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	Requestor's Name)	
	Address)	
	Address)	_
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(1	Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions t	to Filing Officer:	
,	J. HORNE	
,	APR Z 0 2022	
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Office Use Only



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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Sect Division of Corpo			
SUBJECT:		Lean LLC ted Liability Company	· ·
The enclosed Articles of A	mendment and fee(s) are sub	nitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Crys	Name of Person	
	50.re	in ty (lean	
	1601	Taylor 12d	
	Punte	City/State and Zip Code	33950
	E-mail address: (1	o be used for future annual report not	Camail. com
For further information con	ncerning this matter, please ca	ali:	
Crust Name of l	Person	at (9-11) 747 Area Code Daytin	ne Telephone Number
Enclosed is a check for the	following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address:</u> Registration So		<u>Street Address:</u> Registration Se	ection
Division of Co		Division of Co	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

∑ S 23

ARTICLES	OF ORGANIZATION
	OF SEE TO
	Ž –
Serenity	SSS -7
(Name of the Limited Lighility	ty Company as it now appears on our records.)
(A Florida	Y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on han 10 7072. The and assigned
Florida document number <u>L22000 2 0 0 3 3</u>	_ .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
•	
The new name must be distinguishable and contain the words "Limi	ited 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 ADDR.	(ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D 16	3 - 60 1 3
B. It amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the name of the new register</u>
agent and/or the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Emer vioriau sireei aaaress
	, 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

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	Crystal Lewis	1601 Taylor Rd. Punta Gorda Fl 33150	🛮 🗖 Add
			□Remove
			□Change
			□Add
			□Remove
		 	□Change
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ffect	ive date, if other than the date of filing:
iote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nent's effective date on the Department of State's records.
recor I is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
ated	April 4 . 1012
	Signature of a member or anthorized representative of a member
	Crystal Lewis Typed of printed name of signee