

K22000047673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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22 FEB -7 PM 3:12

T. MATTHEWS

MAR 16 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXPERIENCE DIGITALLY, 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:

Dermot Mac Mahon

Name of Person

Dermot Mac Mahon, P.A.

Firm/Company

12161 Ken Adams Way, #188

Address

Wellington FL 33414

City/State and Zip Code

dmacmahon@macmahonlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dermot Mac Mahon

Name of Person

at (561)

Area Code

227-1523

Daytime Telephone Number

Enclosed is a check for the 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**

EXPERIENCE DIGITALLY, LLC

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

22 JAN -7 PM 3:12

The Articles of Organization for this Limited Liability Company were filed on January 26, 2022 and assigned Florida document number 422000047673

This amendment is submitted to amend the following:

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

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) _____

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

_____, 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 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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Christopher M Levy</u>	<u>12161 Ken Adams Way</u>	<input type="checkbox"/> Add
		<u>Suite 110-G1</u>	<input checked="" type="checkbox"/> Remove
		<u>Wellington FL 33414</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Cari A Cantillo</u>	<u>12161 Ken Adams Way</u>	<input type="checkbox"/> Add
		<u>Suite 110-G1</u>	<input checked="" type="checkbox"/> Remove
		<u>Wellington FL 33414</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Alexa Fernandez</u>	<u>7401 Wiles Road</u>	<input type="checkbox"/> Add
		<u>suite 311</u>	<input checked="" type="checkbox"/> Remove
		<u>Coral Springs FL 33067</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Shearly Reyes</u>	<u>7401 Wiles Road</u>	<input type="checkbox"/> Add
		<u>Suite 311</u>	<input checked="" type="checkbox"/> Remove
		<u>Coral Springs FL 33067</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Ferreys & Company LLC</u>	<u>7401 Wiles Road</u>	<input checked="" type="checkbox"/> Add
		<u>Suite 311</u>	<input type="checkbox"/> Remove
		<u>Coral Springs, FL 33067</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>MADE YA CLICK! LLC</u>		<input checked="" type="checkbox"/> Add
		<u>12161 Ken Adams Way</u>	<input type="checkbox"/> Remove
		<u>Suite 110-G1</u>	<input type="checkbox"/> Change
		<u>Wellington FL 33414</u>	

[illegible]

(If an effective 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 605.0207 (3)(b)

If the record 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 record is filed.

Genet Mee Melhar
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Dermot Mac Mahon
Typed or printed name of signee

Typed or printed name of signee

Filing Fee: \$25.00