L2200085105

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
JUL 2 5 2022

Office Use Only



600390551366

FILED RECEIVED

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

07/22/2022

D	ate:	07/22/2022	
		Acc#I20160000072	- 4:1 DW
Name:	Thriveprot	ect Risk Management	LLC
Document #:			
Order #:	14454666		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certifie Plain: COGS:	d: 🗸	
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amoun	t: \$ 60.00	

Thank you!

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

Thriveprote	ect Risk Management LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	John Pruitt		
		Name of Person	
	Eversheds Sutherland (US) !.l.P	
		Firm/Company	
	The Grace Building, 40th	Floor 1114 Avenue of the America	S
		Address	
	New York, NY 10036		
	······································	City/State and Zip Code	
	JohnPruitt@eversheds-suth		
		to be used for future annual report noti	lication)
For further information c	concerning this matter, please c	all:	
John Pruitt		212 389-5053 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addres</u> Registration :		Street Address: Registration Se	ction
Division of C		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2022 JUL 22 AH 8: 37
SECRETARY OF STATE
ALL AHAOSEE, FSTATE

Thriveprotect Risk Management LLC

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

	were filed on 03/01/2022	and assigned
Florida document number 1.22000085105		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:	4081 Lakewood Ranch Blvd. N. #200	
(Principal office address MUST BE A STREET ADDRESS)	Sarasota, FL 34240	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, <u>enter the nan</u>	ne of the new registered
Marco D. Carros 17507 at A. Idonas		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address Florida City	Zip Code
New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	Florida	Zip Code

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

Title	<u>Name</u>	Address	Type of Action
			□Add
		·	□Remove
			□Change
			□Add
		, <u>-</u>	□Remove
			□ Change
			□ Add
		*****	□Remove
			□ Change
			□ Add
			□Remove
			☐ Change
		□ Add	
		□Remove	
			□Add
			□Remove
			□Change

_	
_	
	
_	
_	
-	
_	
Note: 1:	e date, if other than the date of filing:
e record d is file	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 d.
	uly 22 2022
	•
	John Pruitt Signature of a member or authorized representative of a member

• •

Filing Fee: \$25.00