

L22000227132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

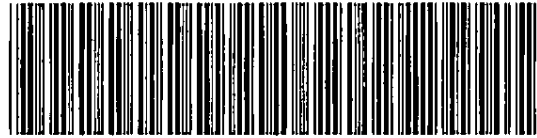
(Business Entity Name)

(Document Number)

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01/10/23--01014--002 \*\*25.00

## COVER LETTER

TO: Registration Section  
Division of Corporations

Request of Change of Business Address

SUBJECT: GLAD TO ASSIST USA, 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:

ROXANNE VICTORINO

Name of Person

Glad to Assist USA LLC

Firm/Company

16057 Tampa Palms Blvd West Box 219

Address

Tampa, Florida 33647

City/State and Zip Code

roxanne@gladtoassist.com

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

For further information concerning this matter, please call:

ROXANNE VICTORINO

561 922 8028

at ( )

Name of Person

Area Code

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**

GLAD TO ASSIST USA, 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 04 JANUARY 2023 and assigned  
Florida document number 300387828993.

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:**

16057 Tampa Palms Blvd West Box 219 Tampa, Florida 33647

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

16057 Tampa Palms Blvd West Box 219 Tampa, Florida 33647

**(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:

ROXANNE VICTORINO

New Registered Office Address:

16057 Tampa Palms Blvd West Box 219

*Enter Florida street address*

Tampa

*City*

Florida 33647

*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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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A single, smooth, hand-drawn curve is sketched on a piece of white paper with horizontal blue lines. The curve starts at a point on the left, rises to a peak, and then descends towards the right. It is drawn with a dark, slightly irregular line, suggesting it was made with a pen or marker. The curve is positioned roughly in the middle of the page, spanning across several of the horizontal lines.

**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.

04 JANUARY 2023  
Dated \_\_\_\_\_

**Filing Fee: \$25.00**