L22000281358

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dunings Faith News)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
January 1

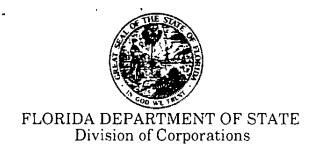
Office Use Only



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02/13/23--01017--007 **25.00





April 13, 2023

BIANCA JACOBS

5883 WINDHOVER DRIVE ORLANDO, FL 32819 US

SUBJECT: INNER G MOTHERHOOD, LLC

Ref. Number: L22000281358

We have received your document for INNER G MOTHERHOOD, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Antoinette A Gonzalez Regulatory Specialist II

Letter Number: 523A00008377



COVER LETTER

	ration Sec n of Corp						
	NER G M	OTHERHOOD, LLC					
SUBJECT:		Name of Lim	ited Liability Company				
The enclosed Ar	ticles of A	amendment and fee(s) are sub	mitted for filing.				
Please return all	correspon	dence concerning this matter	to the following:				
		BIANCA JACOBS					
			Name of Person				
			Firm/Company				
		5883 WINDHOVER DRIV	/E				
			Address		·		
		ORLANDO, FL 32819					2023
		bjacobsbox@gmail.com	City/State and Zip Code				2023 KAY 1
For further infor	mation co	E-mail address: (i neerning this matter, please ca	to be used for future annual	report notification)		. (S) Elim	- AH 9: 5
BIANCA JACC	BS		407 86	1-9080			<u>5</u>
	Name of	Person	Area Code	Daytime Telephon	e Number		
Enclosed is a ch	eck for the	e following amount:					
≡ \$25.00 Filir	ng Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is enc	closed)	60.00 Fili Certificate Certified C (additional c	of Stat	us &
	g Address: tration Se		Street A	ddress: ation Section			
Divisi	on of Co	orporations	Divisio	n of Corporation			
P.O. E	30x 6327	•	The Ce	ntre of Tallahass	ee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INNER G MOTHERHOOD, LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited)	nny as it now appears on our re Liability Company)	<u>:cords.</u>)
he Articles of Organization for this Limited Liability Company were filed on			and assigned
lorida document number L22000281358	·		
This amendment is submitted to amend the following	owing:		
a. If amending name, enter the new name o	f the limited liab	ility company here:	
he new name must be distinguishable and contain the	vords "Limited Liabi		"LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applic	able:	1317 Edgewater Dr	
Principal office address MUST BE A STREI	ET ADDRESS)	Suite 447	C) 23
		Orlando, FL 32804	75 CO
nter new mailing address, if applicable:		1317 Edgewater Dr	,
Mailing address MAY BE A POST OFFICE	BOX)	Suite 447	
		Orlando, FL 32804	9 9
 If amending the registered agent and/or gent and/or the new registered office address. 	4.	address on our records, <u>e</u>	nter the name of the new regist
Name of New Registered Agent:	PhysicalAddres		
New Registered Office Address:	1317 Edgewate	er Dr	
		Enter Florida street a	ddress
	Orlando		, Florida <u>32804</u>
		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
			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			Add Part Remove
			C M Chanke
			□Remove
			□ Change
			🗀 Add
			Петюче
			□Change
		·	□Add
			□Remove
			□Change

			· ~~.
Bianca Ja	Obs Signature of a member or authorized	representative of a member	AH 9: 5
Pated February 1	, 2023		•
d is filed.	ayed effective date, but not an effective time,	at 12:01 a.m. on the earlier of: (b)	The 90th day after
an effective date is liste to the control of the date inse	er than the date of filing: I, the date must be specific and cannot be prior to dated in this block does not meet the applicable ate on the Department of State's records.	(option e of filing or more than 90 days after fit statutory filing requirements, this c	ling.) Pursuant to 605.0
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