L22000299370

(Requestor's Name)	
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COVER LETTER

Registration Section
Division of Corporations

TO:

Higher Pe SUBJECT:	eak Financial, LLC		
	Name of Lin	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Charles J Ruddy		
		Name of Person	
	Higher Peak Financial, LL	С	
		Firm/Company	
	11084 NW 61 Court		
		Address	
	Parkland, FL 33076		
	, , , , , , , , , , , , , , , , , , , ,	City/State and Zip Code	
	cjruddy@comcast.net		
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
Charles J Ruddy		954 801-1500	
Name	of Person	at () Area Code Daytim	e 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 Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Seconds Division of Coron The Centre of Tallahassee, FL	porations fallahassee e Street, Suite 810

Higher Peak Financial, LLC

company has been notified in writing of this change.

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

The Articles of Organization for this Limited I	Liability Company	were filed on July	4, 2022 and assigned
Florida document number L22000299370	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here	≧ :
Higher Peak Insurance Agency, LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	11084 NW 61 Cou	urt
(Principal office address MUST BE A STRE	ET ADDRESS)	Parkland, FL 330	76
			
Enter new mailing address, if applicable:		same	
(Mailing address MAY BE A POST OFFICE	EBOX)		
B. If amending the registered agent and/or agent and/or the new registered office addresses		address on our rec	ords, enter the name of the new registere
Name of New Registered Agent:	Charles J Rudd	<u> </u>	·
New Registered Office Address:	11084 NW 61 G		
		Enter Florida	a street address
	Parkland		, Florida 33076 Zip Code
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	:	
I hereby accept the appointment as register	ed agent and agr	ee to act in this ca	pacity. 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

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

	···aage.	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	10 CHANGES		□Add
			□ Remove
			□ Change
			□ Add
			Remove
			Change
			
			□ Remove
			Change
			
			□Remove
			□Remove
			□Change
		 	🗀 Add
			□Remove
			Change

The	
	new name, Higher Peak Insurance Agency, LLC, is wording FLDFS provided to correct this.
No	other changes.
_	
	
an effecti ote: If t	date, if other than the date of filing:
ecord spis filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	vember 15 2023

D.

Filing Fee: \$25.00