

h22000303451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

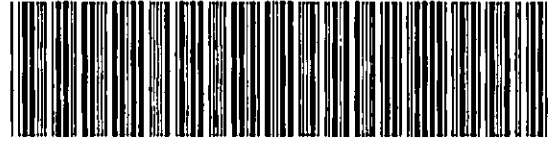
(Document Number)

Certified Copies _____ Certificates of Status _____

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05/30/22 -01012--002 **41.75

12/20/22--01034--002 **11.25

22 DEC 15 AM 4:24

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ReMoneyNow, LLC

DOCUMENT NUMBER: L22000303451

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sheryl Nord

Name of Contact Person

ReMoneyNow, LLC

Firm/ Company

106 Waterwood Drive

Address

Yalaha, Florida 34797

City/ State and Zip Code

sherrynord1@aol.com

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

For further information concerning this matter, please call:

Sheryl Nord

at (317)

9877117

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 21, 2022

SHERYL NORD
106 WATERWOOD DRIVE
YALAHUA, FL 34797

SUBJECT: REMONEYNOW LLC
Ref. Number: L22000303451

*Corrected form
is attached - have
you already filed
the \$\$\$, please
file corrected
form!*

We have received your document for REMONEYNOW LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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

Michael A Hall
OPS Clerk

Letter Number: 522A00025881

22 DEC 15 AM 4:24

DEC 15 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Remoney Now, 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:

Sheryl Nord
Name of Person
Remoney Now, LLC
Firm/Company
106 Waterwood DR.
Address
Galahad, Fla. 34797
City/State and Zip Code
SherryNord1@AOL.com
E-mail address: (to be used for future annual report notification)

22 DEC 15 AM 4:24

For further information concerning this matter, please call:

Sheryl Nord at 317 987-7117
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)

An addl \$11.25 CR.
is attached!

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**

Remoney Now, 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 July 7, 2022 and assigned Florida document number 122000303451

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)

22 DEC 15 AM 4:25

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 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>
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AMBR	Sheryl Nord
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106 Waterwood DR	<input checked="" type="checkbox"/> Add
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Yalaha, Fla	<input type="checkbox"/> Remove
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34797	<input type="checkbox"/> Change
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AMBR	Candace Birle
------	---------------

106 Waterwood DR	<input checked="" type="checkbox"/> Add
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Yalaha, Fla	<input type="checkbox"/> Remove
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34797	<input type="checkbox"/> Change
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	<input type="checkbox"/> Add
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	<input type="checkbox"/> Remove
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	<input type="checkbox"/> Change
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28 DEC 15
AM 10:25
AHQ

22 DEC 19 AM 4:25

22 DEC 15 AM 4:25

(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.

Dated December 11, 2022

Signature of a member or authorized representative of a member

Typed or printed name of signee