## L2200370373

	(Requestor's Name)
	(Address)
	(Address)
·	(City/State/Zip/Phone #)
PICK	C-UP WAIT MAIL
	(Business Entity Name)
····	(Document Number)
⊲l Copies _	Certificates of Status
al Instruct	ions to Filing Officer: Lus to mer Mailed
this	5 Amendment File-Return to
ustome	er MA-L-Out

300398335433

01/13/25--01802--803 \*\*25.60

SECRED IN OF STATE

2023 JAN 13 AM 9: 16

2029 JAN 13 M 8: 34

EE, FLORID

Office Use Only

1/17/2023

## **COVER LETTER**

TO:	Registration Sec Division of Corp	oorations		
CUD U	: сст:	Chal	K Holdings ited Liability Company	<u>7</u>
20BJI	sc1:	Name of Lim	ited Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	idence concerning this matter	to the following:	
			immy Chal	K
			Name offerson	
			Firm/Company	
		541 Rive	Address	
			Address	
		Ormand	Beach, FL3. City/State and Zip Code 1ess 40@gmail.	2176
		Chalky	City/State and Zip Code	C 34
		E-mail address: (	to be used for future annual report noti	fication)
For fur	ther information co	ncerning this matter, please c	all:	
			(	
	Name of	Person	at () Area Code Daytim	e Telephone Number
		e following amount:		
<b>₽</b> \$2	5.00 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 S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address: Registration Se Division of Con The Centre of 7 2415 N. Monro Tallahassee, FL	rporations Fallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

6

alK	Holding 5		2023 JAN 13 AM 9:16
Liability Comp Florida Limited	any as it now appears on our r Liability Company)	ecords.)	SECKLIA OF STATE TALLAHASSEE, FL
lity Compan	y were filed on <u>Augus</u>	+23,	2022 and assigned
0373	<i></i>		-
ng:			
s <u>LL</u>			
s "Limited Liab	oility Company," the designation	"LLC" or the	abbreviation "L.L.C."
e:			
(DDRESS)			
<u>X)</u>			
			<del></del>
stered office <u>ere</u> :	address on our records, e	nter the na	ame of the new registered
	Enter Florido street e		
	ishter i fortud street d		
	City	_, Florida <sub>.</sub>	Zip Code
	lity Companio 3 73  ng:  e limited liab s "Limited Liab e:	lity Company as it now appears on our reflorida Limited Liability Company)  lity Company were filed on Augus  o 3 73  ng:  e limited liability company here:  s "Limited Liability Company," the designation  e:  ADDRESS)  Stered office address on our records, e ere:	e limited liability company here:  S

## 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 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
MGR	Jimmy Chalk	541 Riverside Or. Ormon	d Bendal Add
			□ Remove
			□ Change
			🗆 Add
			□ Remove
		<del></del>	□Change
			□Add □Remove
			□ Change
			□ Add
			□Remove
			□Change
			□Add
		·	□Remove
			□Change
			🗀 Add
			□Remove
			□ Change

-	
	<u> </u>
Note:	tive date, if other than the date of filing:
d is f	
Dated	January 13, 2023
	Signature of a member or authorized representative of a member  Lyped or printed name of signer
	<u> </u>

E. 635.00