(AA)00373757

(Requestor's Name)
(Address)
(411
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L

Office Use Only



300418722813

11/27/23--01049--005 **43.75



December 12, 2023

RONNIE MACK AND SAMANTHA MACK 6316 SAN JUAN AVE STE 42B JACKSONVILLE, FL 32210

SUBJECT: MAKE IT COUNT ENTERPRISE, LLC

Ref. Number: L22000373757

We have received your document for MAKE IT COUNT ENTERPRISE, 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 Florida profit corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Morgan E Lovett Regulatory Specialist II

Letter Number: 323A00028307

www.sunbiz.org

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Massa	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Rossie Mai	H Tr. and Samuni Name of Person	tha Mack
	Make It C	Firm/Company	11.0.
	6316 San Tu	Tun Ave Ste 42B Address	
	Tacksoni'lle	F1 32210	
	Samanba- 17	City/State and Zip Code State and Zip Code State and Zip Code to be used for future annual report notifi	ication)
For further information ec	oncerning this matter, please co		
Name of	Person	Markat (<u>904</u>) <u>Cla2 - 90</u> Area Code Daytime	Telephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	S30.00 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Make It	Count Enleprise, LLC	
(Name of the Limi	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
the Articles of Organization for this Limited L	iability Company were filed on 8/25/22	and assigned
lorida document number <u>1220 ao 3737</u>	<u> </u>	
his amendment is submitted to amend the following	lowing:	
a. If amending πame, <u>enter the new name o</u>	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or the abb	reviation "L.L.C."
nter new principal offices address, if applie	cable:	-
Principal office address MUST BE A STREI	ET ADDRESS)	
	-	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	ROY	
THE SERVICE STREET	<u> </u>	
	-	
. If amending the registered agent and/or i	registered office address on our records, enter the name	of the new régister
gent and/or the new registered office addre	ss here:	/
Name of New Registered Agent:	Samantha Mack	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	6316 San Tuan Ave. Ste. 428	
	Enter Florida street address	-
	Jacksonville Florida 5	2210 -
	Civ	Zin Cods

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
CFO	Ronnie Mack Tr.	10316 San Trun Ave. Ste 4	<u>(28°</u> □Add
		Jackson Me, 12 32210	□Remove
			🗹 Change
CEO	Samanthe Mach	6316 San Tuan Ave. Ste 9.	ZB ZAdd
		Jacksonille, Fx 32210	□Remove
			Chunge
MCK	Samantha Littles	16316 San Tuan Ave. Sec. 9215	□Add
		Tacksonille, FL 32210	Remove
			OChange
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			[]Change

	yas <u>peen t</u>	the mar			ch additiona			
		y man		<u>-</u>	<u> </u>	2120	<u>ramar</u>	MA
Mac	B (Furme	4/1 Little	<u> </u>	ganie .	Mack	2 4	he Rich	is borne
1	· / / ·	/						
11900	t and c	120 41	Make	IL C.	and L	Tolar j	2750 X	120
Z	Saman/h	Mark	B. 16	1 11	L"	4/	/ /	. //
			<u> </u>	<u>0_11c</u>	<u> </u>	150000		
and	CHO 01	Miche	22 6	Care !	Lolery	ر سخدرمرہ	110	
					.55			
	<u> </u>							
					 .	·		
								
						<u></u>		
							_	<u></u>
						-		
		<u> </u>						
					<u> </u>			
								٠.
								
			 -			-		
			· - · · ·					· · · · ·
								. —
tive date	, if other than t	the date of filir	ng:			(o	ptional)	
If the da	e is listed, the date t	must be specific an	nd cannot be pr	for to date of t	iling or more th	ian 90 days a	after filing.) P	ursuant to 605.0
nent's eff	te inserted in this ective date on the	Department of	State's recor	ds.	ory tiling req	uirements,	this date w	Il not be liste
		•						
		dive date, but no	ot an effective	etime at 12.				
rd specific	es a delayed effec			time, at 12.	01 a.m. on th	e earlier of	(b) The 9	0th day after
rd specific	es a delayed effec	, 0		c vine, at 12.	01 a.m. on th	e earlier of	(b) The 9	0th day after
rd specific iled.					01 a.m. on th	e earlier of	(b) The 9	0th day after
rd specific	rember L	12./	20.2	7			(b) The 9	Oth day after
rd specific iled.	rember L	12./	20.2	7			(b) The 9	Oth day after
rd specific iled.	rember L	12./	20.2	7			: (b) The 9	Oth day after
rd specific		Signature of a	. <u>202.</u> member or au	7			(b) The 9	Oth day after