## L22 000 405771

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Division of Co		•	<b>t.</b>
The Ruach	Group, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	William W. Tisko		
		Name of Person	<del></del>
		Finn/Company	<del></del>
	6180 SW 83rd Pl		
		Address	
	Trenton, FL 32693		
		City/State and Zip Code	<u></u>
	billy.tisko@gmail.com	to be used for future annual report no	When the N
For further information c	oncerning this matter, please co	ŕ	inication)
William W. Tisko		863 512-1869	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fee &amp; Certified Copy (additional copy is enclosed)</li> </ul>	\$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	-	Street Address:	
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632	-	The Centre of	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



December 16, 2022

WILLIAM W. TISKO 6180 SW 83RD PL. TRENTON, FL 32693

SUBJECT: THE NUACH GROUP, LLC

Ref. Number: L22000405771

We have received your document for THE NUACH GROUP, 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):

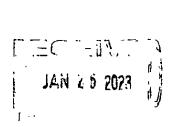
OUR RECORDS REFLECT, THE NUACH GROUP, LLC, ON THE AMENDMENT FORM THE NAME IS SPELLED THE RUACH GROUP, LLC. PLEASE CORRECT.

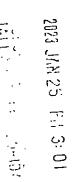
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Alecia Rivers Regulatory Specialist II

Letter Number: 622A00028052





www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on ourgent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	r records, enter the name of the new res
Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on ou gent and/or the new registered office address here:	r records, enter the name of the new res
Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on ou	r records, enter the name of the new res
Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on ou	r records, enter the name of the new res
Mailing address MAY BE A POST OFFICE BOX)	r records, enter the name of the new rec
Mailing address MAY BE A POST OFFICE BOX)	20 20 20
	~>
<del></del>	
Principal office address MUST BE A STREET ADDRESS)	
Enter new principal offices address, if applicable:	<del></del>
he new name must be distinguishable and contain the words "Limited Liability Company," the	ne designation "LLC" or the abbreviation "L.L.C."
The Nuach Company, LLC	nere.
A. If amending name, enter the new name of the limited liability company	here
This amendment is submitted to amend the following:	
lorida document number L22000405771	
	09/16/2022 and assigned
The Amilian of Ourselessian for this Limited Lightlife Commons word filed on	CO
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan)  The Articles of Organization for this Limited Liability Company were filed on	**

## 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 ac or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Cari A. Tisko	6180 SW 83rd Pl	□Add
		Trenton, FL 32693	■Remove
			□Change
MGR William W. Tisko	William W. Tisko	6180 SW 83rd Pl	■Add
		Trenton, FL 32693	□Remove
			□Change
AMBR	Cari A. Tisko	6180 SW 83rd Pl	■Add
		Trenton, FL 32693	□Remove
		<del></del>	□Change
			□Add
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		<del></del>	□ Change
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		<del></del>	□Add
			□Remove

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	<del> </del>
	09/20/2022
(If an ef Note:	(optional) fective 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
he reco ord is f	rd 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 led.
Dated	September 20th 2022
	Signature of a member or authorized representative of a member
	<b>'</b>
	Cari A. Tisko

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