6/9/23, 11:56 AM

Division of Corporations

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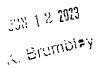
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SUBJECT:	GENERA	TION LEGACY CONSULTA	ANT LLC	
701 701,		Name of Lir	mited Liability Company	
The enclosed	l Articles of .	Amendment and fee(s) are sul	bmitted for filing.	
Please return	all correspo	ndence concerning this matter	r to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
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		nicole.smith080@gmail.co	m to be used for future annual report o	
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Cheyenne M	oseley		800 773-0888 nt () Area Code Day	time Telephone Number
	Name of	Person	Area Code Day	time Telephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 Fi	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fec & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2023-06-09 09:58:33 PDT

GENERATION LEGACY CONSULTANT LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000419812</u>	were filed on 09/27/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abb	reviation "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)		
B. If amending the registered agent and/or registered office address here:		,
Name of New Registered Agent:	•	023
New Registered Office Address:		2023 JULY
	Enter Florida street address	9 17.2
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Cuy	ယ္ ယ
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am fa ovided for in Chapter 605, F.S. Or, ij	miliar with and this document is

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Tolando Cieveiand		
		1878 Green Island Cir., Orange Park, FL 32065	D Add
		1976 Green Island Cit., Change Faix, PL 32003	Remove
			Change
			
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			Change

D 16	. 11			
D. If ame	nding:any other inform	ation, enter change(s) here: (Attach a	idditional-sheets, if necessary.)	
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E. Effectiv	ve date, if other than the	date of filing:	(optional)	
(II an effe	ctive date is listed, the date mus	t be specific and cannot be prior to date of filing	or more than 90 days after filing.) Pursuant to	605.0207 (3)(h)
docume	i the date inserted in this fil- nt!s effective date on the D	ock does not meet the applicable statutory epartment of State's records.	titud tedorietietis, tusioate mit not be	usted as the
f the reco	ord specifies a delayed	l effective date, but not an effecti	ve time, at 12:01 a.m. on the ea	rlier of:
b) The	90th day after the rec	ord is filed.		
	h1 . c	0.002	~	
Dated	May 9	(20 D))	
	(h/)	1/11/10/16/12	<i>!</i>	
	I FANKE	of the the the	,	

To:

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Typed or printed name of signee

Filing Fee: \$25.00