# 122000478816

	(Requestor's Name)	
	(Address)	
	(Address)	
¥	(City/State/Zip/Phone #)	
M bick.	UP WAIT MAII	L
· —	(Business Entity Name)	
	(Document Number)	
∾! Copies	Certificates of Status	
al Instructio	ons to Filing Officer:	
	Office Use Only	



500398471295

12/08/22--01020--018 \*\*25.00

155 DEC -6 PM 15: 1

2022 DEC -6 AM 8: 4

A. BUTLER

DEC - 7 2022

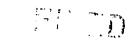
# . COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	The Bag	Collection Lead Liability Company	LC_
The enclosed Articles of /	amendment and fee(s) are subm	itted for filing.	
Please return all correspor	dence concerning this matter to	the following:	
	3909 R	Name of Person  Bay College Firm/Company  CSELUC Prive  Address  City/State and Zip Code  o be used for future annual report notif	Apt Land
	<u>admin al the landing address: (to E-mail address: (to E-mail address) (to E-mail address)</u>	o be used for future annual report notif	ication)
For further information co	oncerning this matter, please ca		
Lugene J	C Cohs f Person	at ( <u>850</u> ) <u>363</u> Area Code Daytine	- 65 46 Telephone Number
Enclosed is a check for th	ne following amount:		
D \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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 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



2022 DEC -6 AH 8: 48 The Articles of Organization for this Limited Liability Company were filed on \_and assigned Florida document number <u>L 2</u>2000 4788/6 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 "L1.C" or the abbreviation "L1.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 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

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.

Cuv

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>	Name	Address	Type of Action
MGR	Eugene Jacobs	3909 Reserve Prive Apt 10 Tallahassec, FC 32511	28 ZAdd
		100/2000	
			Change
			🖸 Add
			□Remove
			DChange
	·		🗆 Add
			□Change
			DAdd
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			🗆 Change

				<del></del>	
			<del></del>		
	<del></del>				
<del></del>					
Fective date, if other the neffective date is listed, the ote: If the date inserted in cument's effective date o	n this block does not t	meet the applicabl	date of filing or more than e statutory filing requi	(optional) 190 days after filing.) Pursu rements, this date will n	ant to 605.0207 ot be listed as
cord specifies a delayed s filed.	effective date, but no	nt an effective time	, at 12.04 a.m. on the	earlier of: (b) The 90th	day after the
od <u>De cember</u>	64h	2022	name of signee	7	
	8000	~ (/L			
		~ <del>~~~~~</del>		<b>.</b>	

• • •

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 DEC -6 AM 8: 48

(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)
orida document number <u>L22000 U778/6</u> .
nis amendment is submitted to amend the following:
. If amending name, enter the new name of the limited liability company here:
nter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)
nter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registerec</u> gent 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 hability 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:

or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Cingene Jacobs	3909 Reserve Prive Art le Tallahessee, FC 32311	<u>028</u> 12/40d
			Change
			(DAdd
			□Remove
			□Сһавус
			□Add
			🗆 Remove
			Change
			🗆 Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			□Remove

lf ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
	(optional)  effective date, if other than the date of filing:  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  te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the comment's effective date on the Department of State's records.
the record	ecord 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 s filed.
Da	red December 6th 2022
	Signature of a member afformed representative of a member