L22005168700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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3/15/23
V.M.

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2023 JAN -3 PM 2:28
SECRETARY OF STATE
TALLAHASSEE FL

CSC – NCH – IFF

TO: PHYSICAL: Dept. of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING: Dept. of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.
1450 Vassar St
Reno NV 89502
(800) 638-2320
(775) 329-0852

DATE: Tuesday, December 20, 2022

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

- Articles of Amendment
  For **SIDESCHIK, LLC**

We have included payment in the amount of $25.00 for the following fees:

- Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department
1450 Vassar St
Reno NV 89502

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIDESCHIK, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Corporate Maintenance Lead
Name of Person

Processing Department
Firm, Company

1450 Vassar St
Address

Reno, NV 89502
City, State and Zip Code

E-mail address to be used for future annual report notification

For further information concerning this matter, please call:

Processing Department at (800) 638-2320
Name of Person — Area Code — Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $25.00 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 Section
Division of Corporations
P.O. Box 527
Tallahassee, FL 32314

STREET COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIDESCHIK, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment are submitted for filing.

Please return all correspondence concerning this matter to the following:

Corporate Maintenance Lead
Name of Person

Processing Department
Firm/Company

1450 Vassar St
Address

Reno, NV 89502
City/State and Zip Code

E-mail address to be used for future annual report notification

For further information concerning this matter, please call:

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MAILING ADDRESS:
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SIDESCHIK LLC

Name of the Limited Liability Company as it now appears on our records.

The Articles of Organization for this Limited Liability Company were filed on 12/08/22 and assigned Florida document number L22000516870

The undersigned 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" or "Limited Company" or the abbreviation "L.L.C." or "LLC" or "L.C." or "LC". The word "Company" may not be abbreviated as "Co."

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2023 JAN -3 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

6001 Argyle Forrest Blvd Suite 21 Pmb 102
Jacksonville
FL, 32244

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

6001 Argyle Forrest Blvd Suite 21 Pmb 102
Jacksonville
FL, 32244

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: _____
(P.O. Box numbers are not acceptable)

_____, 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. 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

Title	Name	Address	Type of Action
MGR	Danielle Harrell	6001 Arnold Forrest Blvd Suite 23 PMB 162	☐ Add
		Jacksonville	☐ Remove
		FL, 32244	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: [illegible]

E. Effective date, if other than the date of filing: N/A **(optional)**

If an 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 (3)(b))

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated: December 16, 2022

Danielle Harrell

Signature of a member or authorized representative of a member

Danielle Harrell

Typed or printed name of signee

Filing Fee: $25.00