

L22000528247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600413589166

09/07/2009 01:00:00 **60.00

FILED

2009 SEP -6 PM 2:42

TALLAHASSEE, FLORIDA

RECEIVED

2009 SEP -6 PM 4:09

TALLAHASSEE, FLORIDA

Emilio Manuel Lopez

Requesters name

1125 Democracy Drive

Address

Haines City, FL 33844

City/State/Zip

727-355-1017

Phone

OFFICE USE ONLY

Empower Group Florida LLC L22000528247

CORPORATION NAME(S) AND DOCUMENT NUMBER(s) (if known):

CORPORATION NAME AND DOCUMENT NUMBER

CORPORATION NAME AND DOCUMENT NUMBER

CORPORATION NAME AND DOCUMENT NUMBER

CORPORATION NAME AND DOCUMENT NUMBER

CORPORATION NAME AND DOCUMENT NUMBER

CORPORATION NAME AND DOCUMENT NUMBER

CORPORATION NAME AND DOCUMENT NUMBER

CORPORATION NAME AND DOCUMENT NUMBER

☒ Walk-in

☐ pick-up time _____

☒ certified copy

☐ Mail out

☐ will wait

☐ photocopy

☒ Certificate of Status

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Empower Group Florida LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Emilio Manuel Lopez
Name of Person

Empower Group Florida LLC
Firm/Company

1125 Democracy Drive
Address

Gaines City, FL 33844
City, State and Zip Code

emilio@empowergroupflorida.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Emilio Lopez at 727, 355-1017
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 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

FILED

2023 SEP -6 PM 2:42

Empower Group Florida LLC TALLAHASSEE, FLORIDA
(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Dec 19th 2022 and assigned
Florida document number L33000528247.

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1125 Democracy Drive

Haines City, FL

33844

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1125 Democracy Drive

Haines City, FL

33844

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

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 liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

D. If amending any other information, enter change(s) here: *(Attach additional sheets if necessary.)*

2023 SEP -6 PM 2:42
TALLAHASSEE, FLORIDA

FILED

E. Effective date, if other than the date of filing: _____ (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 605.020(1)(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 Sept. 6 2023

Signature of a member or authorized representative of a member

Emilio Manuel Lopez
Typed or printed name of signer

Filing Fee: \$25.00