

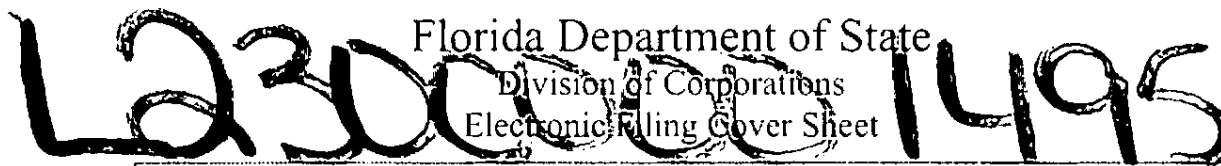
From: BMD Fax
1/6/25, 2:40 PM

Fax: +13302531977

To:

Fax: +18506176383
Division of Corporations

Page: 1 of 5 01/06/2025 3:01 PM
(((H25000006115 3)))



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(((H25000006115 3)))



H250000061153ABCU

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BRENNAN, MANNA & DIAMOND, P.L.
Account Number : I20040000104
Phone : (904)366-1500
Fax Number : (904)366-1501

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: sldobak@bmdllc.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
2A4LIFE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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RECEIVED

2025 JAN -6 PM 4:22

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2025 JAN -6 AM 8:30

COVER LETTER

(((H25000006115 3)))

**TO: Registration Section
Division of Corporations**

SUBJECT: 2A4LIFE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alex J. McCallion, Esq.

Name of Person

Brennan, Manna & Diamond, LLC

Firm/Company

4518 Fulton Road, Suite 202

Address

Canton, Ohio 44718

City/State and Zip Code

ajmccallion@bmdllc.com

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

For further information concerning this matter, please call:

Alex J. McCallion, Esq.

330 374-7473
at ()

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2A4LIFE, LLC

(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 12/27/2022 and assigned
Florida document number L23000001495.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

6586 Hypoluxo Road #124

(Principal office address MUST BE A STREET ADDRESS)

Lake Worth, FL 33467

Enter new mailing address, if applicable:

6586 Hypoluxo Road #124

(Mailing address MAY BE A POST OFFICE BOX)

Lake Worth, FL 33467

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:

Paul Charter

New Registered Office Address:

6586 Hypoluxo Road #124

Enter Florida street address

Lake Worth

Florida

33467

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.

DocuSigned by:

PAUL CHARTER

If Changing Registered Agent Signature of New Registered Agent

Paul Charter

DocuSign Envelope ID: 884FB662-78E8-443D-B731-958E1E1FEA92

It is hereby 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Mark Evans	7957 N. University Drive #160	<input type="checkbox"/> Add
		Parkland, FL 33067	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Stephen Management Corp.	7957 N. University Drive #160	<input type="checkbox"/> Add
		7957 N. University Drive #160	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Core Strength Marketing Group, LI	798 Aurelia Street	<input type="checkbox"/> Add
		Boca Raton, FL 33486	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jesse Deutscher	313 E. Palmetto Park Road, Apt. 408	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Paul Charter	7751 Great Oak Drive	<input checked="" type="checkbox"/> Add
		Lake Worth, FL 33467	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

N/A

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 605.0207 (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 01/06/2025 2025

- DocuSigned by:

Signature of a member or authorized representative of a member

Paul Charter, Authorized Member

Typed or printed name of signee

((1125000006115 3)))

Filing Fee: \$25.00